

Financial Certification

English As A Second Language Institute
Jackson State University
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Financial Certification/ Source of Support

I. **Personal and/or Family Savings** Amount: \$ _____

Name of Bank: _____

Address: _____

Telephone Number: _____ Fax Number: _____

II. **Parents and/or Sponsors** Amount: \$ _____

Name of Parent (s): _____

Address: _____

Telephone Number: _____ Fax Number: _____

Name of Sponsor (s): _____

Address: _____

Telephone Number: _____ Fax Number: _____

III. **Government or Other Agency** Amount: \$ _____

Name of Government/Agency Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Note: If you are sponsored by a government or other official agency, please send to the ESLI a signed copy of your award letter.

IV. **Other (Please specify and indicate name and address below.)**

Name: _____ Amount: _____

Address: _____

Telephone Number: _____ Fax Number: _____