

CONSULAT GENERAL DE FRANCE A WASHINGTON Visa Section

FINANCIAL GUARANTEE FOR A STUDENT VISA

I, the undersigned,	(ful	ll name of the sponso	r), hereby certify that I am the
□ mother/father	☐ guardia	n other (spec	rify)of
		(full nam	e of student)
and that I agree to pro	ovide him / her	with a monthly allow	vance of at least 615 euros, and that I will be held financially
responsible for any inc	cidental expenses	s that may occur duri	ng his / her stay as a student in France.
Please attach a proof	of financial me	eans: most recent ba	nk statement
Print-out from Internet	are not accepted	<u>d</u>	
Signature			Date (day/month/year)
			(Notary Public Seal or Stamp)
Address			(Notary Lubile Sear of Stainp)
City	State	Zip code	
Telephone			