

1000 University Center Lane Lawrenceville, GA 30043 Phone: 678-407-5500 Email: intladmissions@ggc.edu

Affidavit of Financial Support

To be completed by individual providing financial support

Signature	Date
Address	
Relationship to student, e.ç	g., parent, aunt/uncle, friend
Name (printed)	
Gwinnett College. Docume	entation of my financial resources is attached.
a total of US\$	per year for tuition, fees, and living expenses for each year of study at Georgia
I hereby certify that I am wi	lling, able, and committed to provide (name of student)

OI-IS-02 Last revised 9/29/21