CONFIRMATION OF SPONSORSHIP

This confirmation must be signed in the presence of a notary public.

I, _____of _____
NAME STREET ADDRESS

_____
CITY STATE ZIP CODE

declare my intention to undertake financial responsibility and all other liabilities for

_____ while he/she is enrolled at
FULL NAME

Carroll Community College.

Attached are official financial documents to verify that a minimum of $15,000 U.S. dollars is on reserve for tuition payment.

_____
Signature

_____
Name (Please Print)

_____
Notary Public