

**LETTER OF FINANCIAL SUPPORT**

I, \_\_\_\_\_ as the \_\_\_\_\_ of  
(Your Full Name) (Relationship: Father, Mother, Guardian, Sponsor)

\_\_\_\_\_ hereby agree to provide financial support sufficient to cover  
(Student's Full Name)

the full program tuition amount and living expenses estimated at US\$\_\_\_\_\_ as well

as any other unforeseen expenses which may be incurred during his/her program at

**CALIFORNIA COLLEGE OF MUSIC** from \_\_\_\_\_ to \_\_\_\_\_.  
(Program Start Date) (Scheduled End Date)

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Permanent Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number