



CHAPMAN  
UNIVERSITY

Financial Institution Verification Form

Student Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

*A bank official should fill out the following information.*

Below is certified information regarding the financial information for \_\_\_\_\_  
(Name of Sponsor)

Name of Bank Officer: \_\_\_\_\_

Title: \_\_\_\_\_

Name of Financial Institution: \_\_\_\_\_

\_\_\_\_\_

Address of the Financial Institution: \_\_\_\_\_

\_\_\_\_\_

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

Required: Bank / Financial Institution  
seal or stamp here

Certifies finances in the amount of \$ \_\_\_\_\_ USD.

Signature of Bank Official: \_\_\_\_\_

Date: \_\_\_\_\_