

Sponsor's Name

Sponsor's Address

Date

AOI College of Languages

4255 Campus Dr.

University Center #A-200

Irvine, CA 92612

To whom it may concern:

I, **Sponsor's Name**, will admit that **Student's Name** will study at AOI College of Languages, and I will guarantee the payment of all the expenses such as tuition, educational expenses, personal expenses, and transportation for **him/her**.

Sincerely,

Sponsor's Name

Sponsor's Signature