



IMPORTANT INFORMATION

Letter of Financial Responsibility

This document is REQUIRED in order to participate in SIT Study Abroad programs.

This Letter of Financial Responsibility is designed to be completed by whoever is handling your financial matters. Although your home institution may be forwarding financial aid, the student and his/her family are ultimately responsible for any payment not received. This Letter of Financial Responsibility also extends to debt incurred abroad, when payment is due to SIT Study Abroad staff or homestay family.

A student or parent can be named as the individual responsible for finances. A social security number is required and is necessary for collecting any past-due debts. International students that do not have a social security number please substitute with either your VISA or passport number.

This document may be faxed to (802) 258-3540 or returned by mail:

SIT Study Abroad
PO Box 676
Kipling Road
Brattleboro, VT 05302-0676

Any questions? Please e-mail: student.accounts@sit.edu



Letter of Financial Responsibility for SIT Study Abroad programs

Student Name: _____

Social Security number: XXX-XX-_____

Name of College or University: _____

Permanent Address: _____

City _____ State _____ Zip _____

Name of person responsible for finances: _____

Social Security number: XXX-XX-_____

Permanent Address: _____

City _____ State _____ Zip _____

The person signing below as the financially responsible party agrees to assume joint liability with the student for any incidental (i.e.: telephone, medical, taxi, etc.) debt incurred during his/her semester or term with SIT Study Abroad. The terms of payment, adjustment and withdrawal set forth in the [Conditions of Participation](#) are incorporated herein and hereby accepted.

In the event of a delinquency, I promise to pay all attorney fees and other reasonable collection costs necessary for the collection of any amount not paid when due.

Signature of person responsible for finances: _____ Date: _____