



Appendix 2: Guarantee of Financial Support for Admission 2024

Kaohsiung Medical University (KMU)

I, _____(name of the guarantor), attach my personal bank statement and certify that I will support all expenses for _____(applicant's name) to study at Kaohsiung Medical University. I will be responsible for the consequences if the applicant cannot afford the tuition and living expenses in Taiwan.

Name of Guarantor: _____

Relationship with the applicant: _____

Phone number: _____

Email: _____

Guarantor's signature: _____

Date (YYYY/MM/DD): _____ Place: _____