

**INTERNATIONAL STUDENT
CERTIFICATION OF FINANCES**

Return directly to the college providing
or requesting this statement.

CONFIDENTIAL

1. YOUR NAME	Mr. Ms. Mrs. Miss	FAMILY (Surname) GIVEN (First) MIDDLE		
	2. PERMANENT ADDRESS			
3. MAILING ADDRESS (If different from above)				4. DATE OF BIRTH
				MONTH DAY YEAR
				5. PLACE OF BIRTH (country)
				6. COUNTRY OF CITIZENSHIP
				7. EXPECTED VISATYPE
				<input type="checkbox"/> Academic or language training (F)
				<input type="checkbox"/> Non-academic vocational (M)
				<input type="checkbox"/> Exchange visitor (J)
				<input type="checkbox"/> Immigrant (PR)
				<input type="checkbox"/> Diplomatic or official (A or G)
				<input type="checkbox"/> Other (Specify) _____

8. Enter the expected amount of annual support from the sources listed below. Enter amounts in US dollars. Please PRINT all entries. Use an additional sheet of paper for explanations, if necessary.

STUDENT'S SOURCES OF FUNDS	ASSURED SUPPORT	PROJECTED SUPPORT			
	FIRST YEAR	SECOND YEAR	THIRD YEAR	FOURTH YEAR	
8a. PERSONAL OR FAMILY SAVINGS					
NAME OF BANK _____					
A bank official's signature is required on the certification if the student is partially or totally supported by personal savings.					
8b. PARENTS					
Money available from sources other than savings.					
FATHER'S NAME _____					
MOTHER'S NAME _____					
Please describe the source: _____					
8c. SPONSORS					
Money available from sources other than parents.					
SPONSOR'S NAME _____					
SPONSOR'S NAME _____					
Please describe the source: _____					
8d. YOUR GOVERNMENT					
NAME OF AGENCY _____					
Enclose with this form a signed copy of your letter of award.					
TOTAL ▶	\$	\$	\$	\$	

9. OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS
This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

SIGNATURE OF BANK OFFICIAL _____
TITLE _____
NAME OF BANK _____
ADDRESS OF BANK _____
DATE _____

Parent's signature is required (see certification statement above).
SIGNATURE OF PARENT _____
ADDRESS _____
DATE _____

Sponsor's signature is required (see certification statement above).
SIGNATURE OF SPONSOR _____
ADDRESS _____
RELATIONSHIP OF SPONSOR TO STUDENT _____
DATE _____

13. How will you pay for your transportation to the U.S.? _____
14. What is the total amount of money you expect to have when you arrive at this institution? US \$ _____
15. Do you plan to remain in the U.S. during the summer? ... Yes No
16. If remaining in the U.S., do you plan to attend summer school? Yes No

10. What is the present exchange rate of your country's currency to the US dollar (for example, 3100 pesos = \$1)? = \$1
11. Does your government currently impose restrictions on exchange and release of funds for study in the U.S.? Yes No
If YES, describe restrictions. _____
12. Do you have a source for emergency funds once you arrive in the U.S.? Yes No
If YES, name source. _____ Amount available in US dollars \$ _____
17. What are the sources and amounts of support available to you during the summer? AMOUNT
SOURCES: _____ US \$ _____
_____ US \$ _____
_____ US \$ _____
_____ US \$ _____

18. A CERTIFICATE OF ELIGIBILITY (Form I-20 or IAP-66) will not be authorized until this form is completed and returned to the institution to which you are applying. I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.
The institution will attach a copy of this form to your CERTIFICATE OF ELIGIBILITY. Both the form and certificate must be shown to the U.S. Consul to obtain a visa. SIGNATURE OF STUDENT _____ DATE _____

FOR OFFICE USE ONLY

SIGNATURE OF COLLEGE OFFICIAL _____ TITLE _____
NAME OF INSTITUTION _____
ADDRESS _____ DATE _____