



**FINANCIAL STATEMENT FOR INTERNATIONAL STUDENTS ON F VISAS**  
*School of Adult and Continuing Education*

PLEASE NOTE: It is your responsibility to demonstrate that sufficient funding is available to meet all university expenses. An I-20 cannot be issued without this form and supporting documentation. (If you have more than one sponsor, each must be identified and a separate financial statement must be submitted). Please keep copies of all financial documents as you will need them to show proof of funding to U.S. Consular officials when you apply for a visa and when you enter the U.S.

1. **Student Name:** \_\_\_\_\_  
(PLEASE USE NAME AS IT APPEARS ON YOUR PASSPORT FAMILY (SURNAME) FIRST (GIVEN) MIDDLE)
2. **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)
3. **Citizenship:** \_\_\_\_\_
4. **Country of Birth:** \_\_\_\_\_ **City of Birth:** \_\_\_\_\_
5. **Source of Funds:** Please identify the source(s) and amount of funds available. All funds pledged in sponsorship of a student must be verified by a supporting bank letter which must include an account number, account type, the amount in U.S. currency, and be signed and dated by a bank official. The name of sponsor(s) must be on the bank statement.

**TYPE OF SPONSORS AMOUNT**

<b>Self-Sponsored</b> – Complete the form below indicating yourself as the sponsor.	\$
<b>Family Funds</b> – The sponsor must complete the form below.	\$
<b>Company Sponsored</b> – Submit a letter on an official letterhead from sponsor that includes student’s name and indicates in detail which costs (tuition, fees, room, meals, etc.) will be provided.	\$
<b>Other (specify)</b> – The sponsor must complete the section below. Submit a current bank statement verifying that the amount is available.	\$

6. **Sponsor:** This section must be completed and signed by the sponsor. A bank statement including the sponsor’s name must be included.

\_\_\_\_\_

NAME OF SPONSOR (PRINT)

\_\_\_\_\_

RELATIONSHIP OF SPONSOR TO APPLICANT

This is to certify that I, the sponsor, \_\_\_\_\_ will provide funds in the amount of at least U.S. \$\_\_\_\_\_ plus any increase due to inflation, per academic year (9 mos.) for tuition, fees, living expenses, and insurance for \_\_\_\_\_.

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

To be signed by student: I certify that the statements given by me in this form are complete and accurate. Furthermore, should my source of funding, as specified above, be interrupted or stopped. I understand that I remain responsible for all financial obligations.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

	Adult-Learner Undergraduate Programs	Master of Arts in Human Services (33 Credit Hours)	Master of Business Administration (36 Credit Hours)	Master of Education (30 Credit Hours)
Tuition & Fees (Out-of-State) Fall/Spring/Summer	\$22,290	\$31,317	\$34,164	\$28,470

**Important Notes:**

*The adult-learner undergraduate rates above are the estimated Cost of Attendance are based on 12 credits per semester (24 credits total) and 6 credits during the summer term.*

*International student must be enrolled for the minimum of 9 credits per fall and spring semesters and 6 credits per summer term.*

*The rates listed above are estimates and **DO NOT** include estimates for books/supplies, room/board, and transportation. Students attending the School of Adult and Continuing Education are responsible for their own room/board, books/supplies, and transportation.*

**INTERNATIONAL STUDENT DEPENDENT INFORMATION**

Please complete the following section to obtain an I-20 form to bring your **spouse and/or dependent children** to the US. **Parents or other relatives are NOT eligible.** The OIP will issue an I-20 or DS-2019 for a fiancé(e), but keep in mind that in order to obtain a dependent F-2 visa, your spouse will need to demonstrate proof of the marriage during the visa interview. Dependent children must be unmarried and under 21 years of age. You must demonstrate the ability to support your dependents by providing proof of additional funding (cost of individual program + \$5,000 for a spouse and/or \$3,000 for each child) in addition to the funds used to cover your tuition, fees, and living expenses. This amount must be shown regardless of the length of time your dependent(s) will stay in the US.

**First Dependent:** Family Name (Surname): \_\_\_\_\_

First Name (Given): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Gender: Male  Female  Relationship: Spouse  Child

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

**Second Dependent:** Family Name (Surname): \_\_\_\_\_

First Name (Given): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Gender: Male  Female  Relationship: Spouse  Child

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

**Third Dependent:** Family Name (Surname):

\_\_\_\_\_

First Name (Given): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Gender: Male  Female  Relationship: Spouse  Child

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

**Fourth Dependent:** Family Name (Surname):

\_\_\_\_\_

First Name (Given): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Gender: Male  Female  Relationship: Spouse  Child

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

**Fifth Dependent:** Family Name (Surname): \_\_\_\_\_

First Name (Given): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Gender: Male  Female  Relationship: Spouse  Child

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_