

APPLICANT INFORMATION	
NAME	
DOB	
PHONE	
EMAIL	

DEPENDENT INFORMATION	
NAME	
GENDER	
RELATIONSHIP	
COUNTRY OF BIRTH	
COUNTRY OF CITIZENSHIP	
EMAIL	
DOB	

CERTIFICATION OF FUNDING FOR THE DEPENDENT	
TUITION AND FEES	
LIVING EXPENSES	
BOOKS	
HEALTH INSURANCE	
ESTIMATED COST TOTAL	

STUDENTS WITH ASSISTANTSHIPS	
STUDENT STIPEND AMOUNT	
STUDENT RECEIVES AN OUT OF STATE WAIVER OF <u>WHAT</u> CREDIT HOURS A YEAR (PUT N/A IF NON APPLICABLE.)	
STUDENTS RECEIVES A MATRICULATION WAIVER OF <u>WHAT</u> CREDIT HOURS A YEAR (PUT N/A IF NON APPLICABLE.)	
WILL FUNDING CONTINUE FOR THE DURATION OF THE PROGRAM? IF NO PLEASE EXPLAIN.	

STUDENTS WITH SPONSOR SCHOLARSHIPS OR PERSONAL FUNDS		
TYPES OF FUNDING	AMOUNT AVAILABLE	REQUIRED DOCUMENTATION
STUDENT BANK ACCOUNT	\$	OFFICIAL LETTER SIGNED AND DATED, NO MORE THAN 6 MONTHS OLD INDICATING BALANCE TO COVER FUNDS INDICATED ABOVE
SPONSOR: COULD BE RELATIVE, FRIEND, ETC.(IF APPLICABLE FOLLOW DIRECTIONS BELOW)	\$	LETTER FROM SPONSOR CLAIMING THE FINANCIAL FIGURE IS CORRECT, WITH

		EXPLICIT FIGURE LISTED. MUST ATTACH BANK OR OTHER FINANCE INSTITUTION VERIFICATION DEMONSTRATING THE AVAILABILITY OF THE FUNDS REQUIRED. ALSO, MUST HAVE SPONSOR SIGNATURE AND CURRENT DATE. MUST INDICATE RELATIONSHIP TO APPLICANT.
SCHOLARSHIP(S)	\$	AWARD LETTER(S)
OTHER	\$	SPECIFY AND INCLUDE ORIGINAL DOCUMENTATION
TOTAL	\$	

RULES
FUNDS MINUS EXPENSES MUST EQUAL A DIFFERENCE OF 6,000 OR GREATER FOR THE ADDITION OF A SPOUSE.
FUNDS MINUS EXPENSES MUST EQUAL A DIFFERENCE OF 4,000 OR GREATER FOR THE ADDITION OF A MINOR.
FUNDS AND EXPENSES MUST BE PROVED WITH THE COMPLETION AND ADDITIONS SPECIFIED IN THE APPROPRIATE SECTIONS ABOVE.

CERTIFICATION
I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT. I AM FULLY AWARE I AM RESPONSIBLE FOR THE FINANCIAL SUPPORT OF MY FAMILY FOR THEIR ENTIRE STAY IN THE UNITED STATES.
PRINT APPLICANT NAME:
SIGNATURE:
DATE: