

OFFICIAL STATEMENT OF FINANCES FOR INTERNATIONAL APPLICANTS

Please complete this form to state where you will get your funding. You must provide an official bank verification from all sources that are listed on this form. If you are self-sponsored, the bank verification must be in your name. The verification must be in English. Return this completed form with your application package.

GENERAL STUDENT INFORMATION

1. Student Name: _____
Last (Family Name) / Suffix *First* *Middle Initial*

2. Phone (Home): _____ Phone (Mobile) _____ Email: _____

3. International Address: _____
Street *City* *State/Province* *ZIP Code* *Country*

4. US Address: _____
Street *City* *State/Province* *ZIP Code* *Country*

In order for the Form I-20 to be issued, you must submit complete and accurate information of your financial resources together with your bank verification. US immigration regulations require that you demonstrate that you have sufficient funds to cover living and educational expenses for study on a full-time basis. The estimated amounts below include funding needed to cover tuition, fees, living expenses, and mandatory health insurance for one academic year (9 months).

ESTIMATED COST OF ATTENDANCE (COA) PER ACADEMIC YEAR (FALL AND SPRING SEMESTER ONLY)

Maximum estimated expenses per academic year (fall & spring) for undergraduate and graduate students enrolled full-time. "DOUBLE" and "TRIPLE" refer to the number of students sharing a room in the Residence Hall:

	UNDERGRADUATE (12 UNITS)		GRADUATE (9 UNITS)	
	DOUBLE	TRIPLE	DOUBLE	TRIPLE
Tuition	\$5,520	\$5,520	\$5,085	\$5,085
Mandatory Fees	\$ 475	\$ 475	\$ 475	\$ 475
Room & Board	\$3,757	\$3,222	\$3,757	\$3,222
Books & Supplies	\$ 927	\$ 927	\$ 927	\$ 927
Transportation	\$ 419	\$ 419	\$ 419	\$ 419
Student Loan Fees	\$ 200	\$ 200	\$ 200	\$ 200
Miscellaneous	\$1,202	\$1,202	\$1,202	\$1,202
Semester Totals	\$12,500	\$11,965	\$12,065	\$11,530
Annual COA	\$25,000*	\$23,930*	\$24,130*	\$23,060*

*Please add an additional \$5,000.00 per year for each dependent (F-2).

Note: Miscellaneous fees include mandatory F-1 health insurance.

FINANCIAL RESOURCES

UNIVERSITY OF THE WEST RECOMMENDS SHOWING A TOTAL FINANCIAL COMMITMENT OF AT LEAST \$26,000 USD

Please indicate the amount of funds available to you for each year you expect to enroll at the university. Please list all sources, including yourself if you are self-sponsored. Amount must be listed in US dollars. This amount must be more than the listed required amount.

	1st Year	2nd Year
A. From Family	\$ _____	\$ _____
B. From Sponsor	\$ _____	\$ _____
C. From Personal Savings	\$ _____	\$ _____
D. From Government	\$ _____	\$ _____
Total Available	\$ _____	\$ _____

I certify the information I have provided on this Official Statement of Finances is complete and correct to the best of my knowledge. I understand the inclusion of any false information is cause for dismissal from the university.

Signature: _____ Date: _____



FINANCIAL SPONSOR AGREEMENT FORM FOR INTERNATIONAL APPLICANTS

Complete this form if you will be sponsored by anyone other than yourself. Please attach an official bank verification of your sponsor's bank account(s) dated within three months of the application. This verification must be in English.

Your sponsor's original signature is required on this form. Return this completed form with your application package.

GENERAL STUDENT INFORMATION

1. Student Name: _____
Last (Family Name) / Suffix *First* *Middle Initial*

2. Phone (Home): _____ Phone (Mobile) _____ Email: _____

3. International Address: _____
Street *City* *State/Province* *ZIP Code* *Country*

4. US Address: _____
Street *City* *State/Province* *ZIP Code* *Country*

ESTIMATED COST OF ATTENDANCE (COA) PER ACADEMIC YEAR (FALL AND SPRING SEMESTER ONLY)

Maximum estimated expenses per academic year (fall & spring) for undergraduate and graduate students enrolled full-time. "DOUBLE" and "TRIPLE" refer to the number of students sharing a room in the Residence Hall:

	UNDERGRADUATE (12 UNITS)		GRADUATE (9 UNITS)	
	DOUBLE	TRIPLE	DOUBLE	TRIPLE
Tuition	\$5,520	\$5,520	\$5,085	\$5,085
Mandatory Fees	\$ 475	\$ 475	\$ 475	\$ 475
Room & Board	\$3,757	\$3,222	\$3,757	\$3,222
Books & Supplies	\$ 927	\$ 927	\$ 927	\$ 927
Transportation	\$ 419	\$ 419	\$ 419	\$ 419
Student Loan Fees	\$ 200	\$ 200	\$ 200	\$ 200
Miscellaneous	\$1,202	\$1,202	\$1,202	\$1,202
Semester Totals	\$12,500	\$11,965	\$12,065	\$11,530
Annual COA	\$25,000*	\$23,930*	\$24,130*	\$23,060*

*Please add an additional \$5,000.00 per year for each dependent (F-2).

Note: Miscellaneous fees include mandatory F-1 health insurance.

SPONSOR: This section must be completed by the sponsor. Please print name in the English alphabet.

1. Sponsor Name: _____
Last (Family) *First* *Middle Initial*

2. Address: _____
Street *City* *State/Province* *ZIP Code* *Country*

3. Relationship to Student: _____ Phone: _____

I hereby agree to be the financial sponsor for the above-named student and guarantee without reservation to support the educational costs and living expenses of the student while he/she is living in the United States and enrolled at University of the West.

I guarantee I will cover all transportation costs from the student's country of origin to the United States and for their return home upon completion of academic studies.

I further guarantee to provide US \$ _____ per year to the above-named student.

I have attached to this agreement a statement from my bank attesting to my financial status.

Financial Sponsor's Signature: _____ Date: _____

Sponsor's Name (Please Print): _____
Last (Family) *First* *Middle Initial*

