

FINANCIAL STATEMENT FOR INTERNATIONAL APPLICANTS

1. Name: _____

	<u>Undergraduate</u>	<u>Graduate</u>
Tuition & educational expenses for a 9 month academic year	\$17422	\$12748
Single student living expenses for 9 months	\$9650	\$9650
Books and supplies	\$800	\$600
<i>Summer term tuition and fees (3 months)</i>	\$5115	\$3098
<i>Summer term, single student living expenses</i>	\$3158	\$3158
Books and supplies	\$512	\$512

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Cost of attendance for first academic year	\$36657	\$29766
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Estimated expenses for Intensive English Program (one year- 5 Eight Week Sessions): \$25,205

** Estimated living expenses for an accompanying spouse will add \$6,000 annually to the above; add an additional \$5,000 annually for each accompanying child. These estimates are subject to change and do not include travel expenses.*

3. Source and amount of financial support, in U.S. dollars:

ALL FINANCIAL DOCUMENTS MUST BE ORIGINAL AND DATED WITHIN THE PAST 3 MONTHS!

a. **From Applicant's Personal Savings**

(Enclose bank statements which include your full name, translated into English, recently dated, signed and certified by a bank official.)

b. **From Family**

(The support affidavit on the back of this form **MUST BE** completed, signed by the person providing funds. Your family member must also submit statements from their bank statement in "a" above.)

c. **Salary while on leave** \$ _____

Name/address of employer _____

(Enclose validated letter _____

From your employer) _____

d. **Financial Aid from Government or Other Sources** \$ _____

(Enclose letter or award notice)

e. **Other Financial Aid** (Enclose validated affidavit from authorizing agency)\$

TOTAL SUPPORT FOR YOUR FIRST YEAR \$ _____

4. How will you meet your expenses for your second and subsequent years? _____

5. I understand that my I-20/DS-2019 **WILL NOT BE PROCESSED UNLESS THIS FORM IS COMPLETED AND THE REQUIRED DOCUMENTS ARE SUBMITTED.** I certify that information I have given is true and complete. If the information provided is found to be otherwise, then I acknowledge that there is sufficient cause for my rejection or dismissal from the University.

Applicant's signature: _____ Date: _____

The following section **MUST BE** completed by the sponsor.

****AFFIDAVIT OF SUPPORT****

This is to swear and affirm that I will supply the educational and living expenses, as outlined on this form, for (student's name) _____ while he/she attends University of Colorado Colorado Springs for the academic year beginning _____ (date). I further certify that I am able, willing, and do promise to provide the minimum amount of \$ _____, payable in U.S. dollars, for the student's educational and living expenses during said academic year at CU – Colorado Springs. Evidence of my financial resources in the form of an original, certified, recently dated bank statement is enclosed with this affidavit of support.

Printed name of sponsor

Signature of sponsor

date

Address of sponsor

This form **must** be accompanied by an official bank statement, or an official, original statement of your scholarship award.

Without this additional information, your application CANNOT be processed and we CANNOT admit you or issue your form I-20.

PLEASE KEEP THE ORIGINAL/OFFICIAL STATEMENT AND AFFIDAVIT OF ALL DOCUMENTS SUBMITTED TO THE UNIVERSITY. SIMILAR INFORMATION WILL BE REQUIRED BY THE U.S. CONSULAR OFFICE WHEN YOU APPLY FOR A VISA OR BY U.S. CUSTOMS WHEN YOU TRANSFER WITHIN THE U.S.

** Estimated living expenses for an accompanying spouse will add \$6,000 annually to the above; add an additional \$5,000 annually for each accompanying child. These estimates are subject to change and do not include travel expenses.*

Dependent information

Relationship	First Name	Last Name	Date of Birth	City of Birth	Citizenship	Gender
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female
<input type="checkbox"/> Spouse <input type="checkbox"/> Child						<input type="checkbox"/> Male <input type="checkbox"/> Female