Certification of Finances Form for F-1 Student Visas

ADMISSION TO THE INTENSIVE ENGLISH PROGRAM WILL NOT BE GRANTED TO ANY STUDENT WHO DOES NOT COMPLETE THIS FORM.

Estimated Budget for Intensive English Program Students for 2016

The total costs listed here are based on typical full-time course load for the Intensive English Program. U.S. immigration policies require that you document guaranteed funds for your program at the University. Tuition and other costs may vary according to your spending habits and time of stay.

Please select from the following estimated student budgets to determine the total costs for your Intensive English Program.

<table>
<thead>
<tr>
<th></th>
<th>Session A</th>
<th>Session B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(6 weeks: July 5 – August 12)</td>
<td>(4 weeks: July 18 – August 12)</td>
</tr>
<tr>
<td>Tuition and Fees</td>
<td>$2,638</td>
<td>$1,792</td>
</tr>
<tr>
<td>Living Expenses</td>
<td>$2,478</td>
<td>$1,652</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>$975</td>
<td>$650</td>
</tr>
<tr>
<td><strong>2016 Total Estimated Costs</strong></td>
<td><strong>$6,091</strong></td>
<td><strong>$4,094</strong></td>
</tr>
</tbody>
</table>

**Living Expenses** include rent (housing), food and health insurance. All international students are automatically enrolled in the USF student health insurance plan. Please visit www.usfca.edu/hps for student health insurance details and possible exemptions.

**Other Expenses** include books and supplies, local transit pass, and personal expenses.

**Possible Additional Expenses** (not included in the above estimated total costs):

a) International transportation between your home country and California.

b) Dependents (spouse and/or children).

How to Complete This Form

Refer to the 2016 ESTIMATED TOTAL COSTS in the chart above. Your financial documents need to verify that you have the funds for at least the estimated total costs for the Intensive English Program you will be attending.

1. Complete and sign this form.

2. If a sponsor (such as a parent or other person) will help to fund your education, he or she must complete and sign this form in the appropriate sections. If your sponsor is unable to sign this form, please have him or her sign and submit a letter of support in English.

3. **Submit a bank statement stating that the required funds are available.** Bank statements must be issued by the bank and include the account holder’s name and type of account in English.*

   *Please note* that only accounts such as savings accounts, time deposits, certificates of deposit (CDs), and money market accounts can be used to guarantee your funding. Funds from checking accounts and stocks/investments, lines of credit, or statements of income cannot be considered.

4. If you are sponsored by your government or another organization, please submit this letter of support.
Application Term: SUMMER SESSION(S) □ A □ B     Application Year: 2016

Legal Name: ___________________________________________ Date of Birth: ___/___/___
FAMILY NAME GIVEN NAME MIDDLE NAME MONTH DAY YEAR

Country of Birth: __________________________ Country of Citizenship: __________________

SELF-FUNDED OR PRIVATELY SPONSORED STUDENTS MUST COMPLETE PART I.
GOVERNMENT OR AGENCY SPONSORED STUDENTS MUST COMPLETE PART II.

-----------------------------------------------------------------------------------------------------------------------------

Part I: To be completed by all applicants with a private source of funding (ex: self, family, or employer).

I, ____________________________, the student, certify that the amount of USD $ ______________ is fully available to me during my studies in the IEP as a full time student.

Source of Funds: ______________________________________________________
(PARENT, SELF, UNCLE, AUNT, EMPLOYER, ETC.)

Name of Guarantor: ____________________________ Relationship: __________________
(*Note: The name of the guarantor must match the name on the bank of financial institution letter)

Address of Guarantor: _____________________________________________________

Signature of Guarantor: ____________________________ Signature of Student: __________________

Please attach a letter from a bank or financial institution proving that the amount of funds is available.

Part II: Government or Agency Sponsored Students only.

Name of Scholarship agency: _____________________________________________

Name of your counselor/advisor: _________________________________________

Address: _______________________________________________________________________

Telephone #: _____________________________ Email: _____________________________

Please have the agency send a letter guaranteeing support.