FINANCIAL STATEMENT OF INTERNATIONAL UNDERGRADUATE STUDENTS

This form must be fully completed before the I-20 or DS-2019 can be sent to you. It is your responsibility to demonstrate that sufficient funding is available to meet all university and living expenses for one year of your studies and that such funding will be available to you for the duration of your academic program. Forms that are incomplete or lacking satisfactory documentation will not be accepted. Serious delays will be avoided by paying careful attention to each item.

1) Student Name___________________________________________________________________________________________

Family Name First Middle

2) Source of Funds: You Must Submit: (All amounts should be in US Dollars)

__________________________________________________________________________________________________

Original Certified Bank Statement

__________________________________________________________________________________________________

Original Certified Bank Statement

__________________________________________________________________________________________________

Official Letter of Funds and Duration of Award

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Official Letter of Funds and Duration of Award

3) Sponsor (to be completed by the sponsor):

This is to certify that I, ________________________________________________________________

(sponsor’s name printed)

will provide funds in the amount of at least $62,549.00(U.S.) per year for tuition, fees, and living expenses for

_____________________________________________________.

(student’s name printed)

Sponsor’s annual income:________________________ Sponsor’s relationship to student:_________________________

(In US Dollars)

Sponsor’s Address: __________________________________________________

________________________________________________________________________

________________________________________________________________________

(Sponsor’s Signature)

To be signed by the student: I certify that the statements given by me in this form are complete and accurate. Furthermore, I take all financial responsibilities should my source of funding, specified above, be interrupted or stopped; and I understand that the University of New Haven cannot give any additional financial assistance in scholarship form and that permission for employment is Difficult to obtain from the U.S. Department of Immigration and Naturalization.

Student’s Signature________________________________________ Date_________________________________