STATE UNIVERSITY OF NEW YORK FOREIGN STUDENT FINANCIAL STATEMENT Be Sure to Read the Information on the Reverse Side Before Completing This Form.

PART I Write in ink or type						
1. Name of Applicant Mr	(family nam	e)		(first, given)	(middle)	
2. Permanent Address						
Campus to which you are applying			10. Does your country restrict dollar exchange? yes □ no □			
4. Major field/department 5. Degree for which you are applying			What is the maximum dollar amount permitted for a student? \$			
			11.Total amount of U.S. dollars you expect to bring with you upor			
6. I expect my program of study to take			arrival (tuition	on, room, meals, a	nd books must be paid at the begin	
7. Birthdate	•	·	\$,		
			12. Do you have	a source within th	e U.S. for emergency funds once you	
8. Country of Citizenship			arrive in this country? yes □ no □			
9. I plan to come without dependents The following dependents will accommoderate to the company of the com	nnany ma /lis	st names and	•			
relationships)	ipany me (m	or mames and		ailable in U.S.: \$		
PART II Complete each relevant item below						
	Ente		ssured support a study in U.S. do		- Required	
Source of Funds	Year 1	Year 2	Year 3	Year 4	Verification	
Personal Savings Name of Bank	\$	\$	\$	\$	Bank Statement Complete (A) and (C) below	
Account Holder						
Family/Relative/Sponsor	\$	\$	\$	\$	Bank Statement Complete (A), (B), and (C) below	
Name					2. Complete (A), (b), and (C) below	
Name						
Name						
Scholarship/Loan Awarded by	\$	\$	\$	\$	Official award letter. See instructions on reverse side Loan approval letter. See instructions on reverse side Complete (C) below	
Government/Employer/Other	\$	\$	\$	\$	Official letter of support. See	
Name of sponsor	•	Ψ	•	•	instructions on reverse side.	
Other (specify source and type of support)					Bank statements, affidavits, or sworn statements Complete (C) below	
Totals	\$	\$	\$	\$		
VERIFICATION:	J	l	1			
A. This is to certify that the funds indicated (named above) at the savings institution r statement of accounts with official signs	named below.	deposit or are . (Verification o	being held in the f amounts is with	name of the applic nout liability for the	ant, his family members, or sponsor bank or its officials). Attach separat	
Name of Bank			Date			
Bank Official's Title			Bank Official's Signature/Seal			
B. This is to certify that I (we) the undersigned at the State University Campus listed about further understand that the State University for the duration of the applicant's course on non-payment.	ove and that ty cannot pro	l (we) are subm	nitting bank state cial assistance to s not met, the stud	ements indicating to the applicant and dent may be subject	the availability of these funds. I (we I that I (we) must provide these fund:	
Sponsor Signature Date			Relationship to applicant			
Sponsor Signature			Relationship to applicant			
C. This is to certify that the information given	on this form	is complete an	d accurate to the	best of my knowled	dge. I am fully aware that any false o	
misleading statement will result in an aut Applicant's Signature						
Applicant's Signature						

STATE UNIVERSITY OF NEW YORK FOREIGN STUDENT FINANCIAL STATEMENT

All foreign applicants must document their ability to meet all educational and living expenses for the entire period of their intended study before this University can issue a Certificate of Visa Eligibility (form I-20 or IAP-66). Read the following instructions carefully before completing and submitting this form.

Instructions: Part I

Answer questions 1-13 completely

Part II

In the first column, indicate the source(s) of your funding. In the columns headed Year 1, 2, 3, and 4, indicate the amount (in U.S. dollars) available for each year of study. Each sponsor must verify these amounts by signing the form on the reverse side. Be sure to include supplementary documents as indicated, and attach originals, not photo copies.

All documentation must be dated within one year of the date of initial enrollment at the SUNY campus to which you are applying. The SUNY campus has provided you with an estimate of their annual education and living costs for foreign students. You must document financial support equal to or greater than this amount. This estimate is subject to change without notice and will usually increase each year.

SOURCES OF FUNDS

REQUIRED DOCUMENTATION

Personal/Family —

Signatures of spnsors on this form. Bank verification on both this form and in a separ-

ate statement of account.

Scholarship —

Official scholarship letter from the institution awarding the scholarship. The award letter must contain the name of the applicant, the amount of money available for each year of study, the duration of the award (including beginning and ending dates), the degree and major field of study for which the award is tenable, and the name of the SUNY campus to which the award is applicable.

Government or Employer —

Official letter indicating amount of support and containing the same information as for "Scholarship" described above.

Loans —

Official letter from credit institution indicating approval of the loan and the amount approved.

Dependent Support -

A student wishing to have his/her family member(s) accompany him/her must document the following amounts for each family member per calendar year of intended study:

For Spouse:

\$2600 per calendar year

For each child: \$1400 per calendar year

The SUNY campus to which you are applying reserves the right to require additional financial documentation and/or pre-payment from applicants whose countries impose currency exchange restrictions or other obstacles to the transfer of currency. Applicants from such countries will be notified of specific requirements when they have submitted complete applications.