INSTRUCTIONS

Please review the following instructions before completing and signing this form.

1. Review the cost estimates and the estimated length of the degree program to which you are applying.
2. Complete the certification indicating the amount of support that will be provided from each source for each year of the program.
3. All proof of financial support must be submitted in English.
4. All proof of financial support must be stated in U.S. dollars and clearly state the date that the documentation was written or printed.
5. All proof of financial support must be an original document.
6. All financial resources must be in liquid assets. Stocks, bonds or other investments with cash value may be accepted if evidenced by a portfolio on the managing firm’s letterhead. Please note that retirement accounts cannot be used as a source of financial support unless the sponsor can provide evidence that he/she is, in fact, retired and able to access those funds without penalty for early withdrawal. Real estate or other non-liquid assets such as automobiles, jewelry or other personal property cannot be used as a source of financial support under any circumstances.
7. Please be aware that evidence of financial support must also be shown to the U.S. Embassy or Consulate when applying for a visa. Therefore, you will need to have two sets of financial support documents — one to submit to Saint Vincent College and one for the U.S. Embassy or Consulate.
8. More than one sponsor may be used. More than one sponsor may copy this form for use.

ESTIMATED LENGTH & COST OF STUDIES

Bachelor’s Degree - Four Years

|                      | First Year* |  |
|----------------------|-------------|
| Tuition & Fees       | $35,077     |
| Room & Board         | $11,274     |
| Other Expenses**     | $3,000      |
|                      | $49,351     |

*Charges are subject to change in future years.
** Other expense estimates include the following:
Books: $980
Insurance: $500/year
Miscellaneous: $85/month (clothing, laundry, entertainment, etc.)

PLEASE DO NOT SEND $49,351 as payment to Saint Vincent College. You will receive a bill for the amount that you owe; however, it will be sent by a traditional mail system and may be subject to prolonged delivery times. Please contact the college for a current bill amount. Items such as insurance, books, etc., are included in the estimate as costs you are expected to incur, but that Saint Vincent College does not necessarily provide. Comprehensive insurance must be arranged prior to entering the United States. Books can be purchased on campus. Please contact the Admission Office for any needed clarification at admission@stvincent.edu

The following are NOT included in the above estimates:
One-time International Welcome Week Fee - $247; Travel Expenses - $2,000/year; other fees not previously declared.
Certification of Financial Responsibility

I/we hereby certify that I/we will provide financial support for ____________________________

Year One  Year Two  Year Three  Year Four

1. Provide each year from annual salary/income.
   Total annual salary in $US__________
   Attach documentation or verification of annual salary/income.

2. Provided from bank account with a total in $US____________________.
   Attach an Official Bank Statement.

3. Provided from other sources.
   Identify source(s) and attach documentation.

4. Total Available from All Sources:

__________________________  ________________________
Signature of Sponsor  Date Signed
Immigration Information

If you are currently INSIDE the United States, please complete the following:

Current Visa Classification:________________________ Current Sponsor/School:_________________________________________

Date of Initial Entry into United States  (mm/dd/yyyy):_________ / ____________ / ____________________________

I-94 Admission Number_________________ I-94 Expiration Date ______ / ______ / __________ (If D/S, check here: ☐)

(NOTE: You must attach supporting documentation verifying current visa classification, e.g., Form I-20, Form IAP-66, Form I-797, etc.)

If you are currently OUTSIDE the United States, please complete the following:

City/Country where you will apply for the required visa:_____________________________________________________

Dependent Information

For each dependent who will accompany you to the U.S., please provide the following information. Use additional sheet if necessary. Please note that a dependent is defined as your spouse and/or any unmarried children under 21 years of age.

#1- Gender: ☐ Male ☐ Female Relationship:__________________________________________________________

Family Name:______________________Given Name:_____________________ Middle Name:_____________________

Date of Birth (mm/dd/yyyy) _______ / _______ / __________ City and Country of Birth:__________________________

Country of Citizenship:_______________________________ Country of Residence:_____________________________

#2 - Gender: ☐ Male ☐ Female Relationship:__________________________________________________________

Family Name:______________________Given Name:_____________________ Middle Name:_____________________

Date of Birth (mm/dd/yyyy) _______ / _______ / __________ City and Country of Birth:__________________________

Country of Citizenship:_______________________________ Country of Residence:_____________________________

#3 - Gender: ☐ Male ☐ Female Relationship:__________________________________________________________

Family Name:______________________Given Name:_____________________ Middle Name:_____________________

Date of Birth (mm/dd/yyyy) _______ / _______ / __________ City and Country of Birth:__________________________

Country of Citizenship:_______________________________ Country of Residence:_____________________________

“The statements and information provided on this application are true and accurate to the best of my knowledge.”

Signature___________________________________________________________            Date___________________________
Biographical Information

**Name:** ____________________________________________________________________________________________

_{Family Name}  
_{Given Name}  
_{Middle Name}

**Gender:** ☐ Male ☐ Female  
**Marital Status:** ☐ Married ☐ Single  
**Date of Birth:** _____ / _____ / __________

**U.S. Social Security Number (if applicable):** ____________________________________________________________

**City of Birth:** __________________________  
**Country of Birth:** __________________________

**Country of Citizenship:** __________________________  
**Country of Legal Permanent Residence:** __________________________

**Position/Occupation in Home Country:** ________________________________________________________________

_(e.g. student, professor, etc.)_

**Current Mailing Address:**

_{Street Address} _________________________________________________

_{City, State/Province} _________________________________________________

_{Country and Postal Code} _________________________________________________

_{Telephone} _____________________  
_{Fax} _____________________  
_{E-Mail} _______________________________

**Address in Home Country (if different from above):**

_{Street Address} _________________________________________________

_{City, State/Province} _________________________________________________

_{Country and Postal Code} _________________________________________________

_{Telephone} _____________________  
_{Fax} _____________________  
_{E-Mail} _______________________________

**Address to Which Visa Documents Should be Sent:**

_{Street Address} _________________________________________________

_{City, State/Province} _________________________________________________

_{Country and Postal Code} _________________________________________________

_{Telephone} _____________________  
_{Fax} _____________________  
_{E-Mail} _______________________________