



**Graduate Affidavit of Financial Support**

Please read carefully and answer all questions regarding the source(s) of financial support while attending the University of St. Thomas. Under U.S. law, the university must have evidence of adequate financial resources before issuing an I-20. Please complete and return this form with the appropriate documentation. **Once received, this form will become the property of the University of St. Thomas. You should retain another original for your visa interview. An I-20 form will not be issued to you until you have been fully admitted to the University of St. Thomas.**

Name of Student: \_\_\_\_\_

Relationship to student:     Self     Government Agency     Relative/Other: \_\_\_\_\_

**Sponsor's Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Place of Birth (city and country): \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Financial Resources	Amount ( U.S. Dollars)
<b>Personal Funds</b> Attach official bank statement/letter	\$
<b>Family Funds/Sponsor</b> Attach bank statement/letter and letter from sponsor	\$
<b>Scholarship</b> Attach award letter or Financial Guarantee	\$
<b>Other</b> Specify source and attach proof of support	\$
<b>TOTAL</b> (must equal or exceed anticipated expenses)	\$

ESTIMATED COSTS FOR THE 2014-2015 ACADEMIC YEAR		
Tuition: \$1085/credit hour	On-Campus	Off-Campus
Tuition and Fees (based on 9 hours Fall & Spring semesters only)	\$ 20,166.00	\$ 20,166.00
Living Expenses	\$13,008.00	\$ 14,246.00
Books & Supplies	\$ 1,050.00	\$ 1,050.00
Medical Insurance	\$ 850.00	\$ 850.00
<b>TOTAL</b>	<b>\$ 35,074.00</b>	<b>\$ 36,312.00</b>

I certify that the information included in this document is correct and complete and that I shall not require additional financial assistance from the University of St. Thomas. I understand that deliberately providing false information is grounds for denial or for withdrawal of an acceptance. Furthermore, if there are any changes in my financial situation, I will immediately notify the International Student Advisor at the University of St. Thomas.

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date