

#### Documentation of Financial Support for International Students

#### **Documentation Required**

As part of the application for Admissions, The U.S. Citizenship and Immigration Services requires that, all F-1 (Certificate of Eligibility for Non-immigrant - Form I-20) and J-1 (Certificate of eligibility for Exchange Visitor Form DS-2019) applicants provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. college/university.

If the student will use their own personal funds as the main source of financial support, the student must fill out the form and must provide their official bank statement showing available funds.

If a private sponsor such as a family member, friend, private institution, or employer will sponsor the student, the sponsor must sign the Statement of Financial Obligation below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student's duration of study at CSUSB. In either case, the sponsor must also provide an official bank statement showing available funds in liquid assets.

If a public agency such as an embassy, home government, public institution or religious organization will be sponsoring the student, the agency must sign the Statement of Financial Obligation below and **provide** official certification that the appropriate costs will be covered.

\*Bank statements must be signed and/or seal by bank and cannot be older than 6 months from the date the student applied to CSUSB.

| Student Information        |             |                 |
|----------------------------|-------------|-----------------|
| Last Name:                 | First Name: | Middle Initial: |
| Permanent Foreign Address: |             |                 |

#### **Estimated Student Budget for One Academic Year (2 Semesters)**

| Expenses                                  | Undergraduate<br>(24 Units) | Graduate<br>(12 Units) | MBA/MSA/MSIST<br>(12 Units) | Second Bachelor<br>(24 Units) | Doctorate<br>(12 Units) |
|---|-----------------------------|------------------------|-----------------------------|-------------------------------|-------------------------|
| Tuition & Fees includes non-resident fees | \$18,173                    | \$14,657               | \$18,077                    | \$19,697                      | \$19,595                |
| Living Expenses                           | \$16,698                    | \$16,698               | \$16,698                    | \$16,698                      | \$16,698                |
| Books & Supplies                          | \$886                       | \$886                  | \$886                       | \$886                         | \$886                   |
| Transportation                            | \$2,798                     | \$2,798                | \$2,798                     | \$2,798                       | \$2,798                 |
| Health Insurance                          | \$1,908                     | \$1,908                | \$1,908                     | \$1,908                       | \$1,908                 |
| Personal/Misc.                            | \$3,874                     | \$3,874                | \$3,874                     | \$3,874                       | \$3,874                 |
| Total                                     | \$44,337                    | \$40,821               | \$44,241                    | \$45,861                      | \$45,759                |

<sup>\*</sup>NOTE: All fees are subject to change without notice.

<sup>\*\*</sup>Non-Resident Fee: \$420/unit included in above calculation.

<sup>\*\*\*</sup>Graduate Business Professional Fee: \$270/unit (MBA/MSA)/\$105. (MPA) included in above calculation.



**Dependent Information** 

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| •   | •                                     | • •                   | ed States, you must pro                                     | •                         |  |
|---|---------------------------------------|-----------------------|---|---------------------------|--|
| •   | •                                     | •                     | ar (2 semesters) in ordo<br><b>family registry</b> . Please |                           | ·  |
| •   | · · · · · · · · · · · · · · · · · · · | _                     | your dependents acco  | •                         | •  |
| Last Name   | First Name                            | Relation              | Country of Birth  | Country of<br>Citizenship | Date of Birth (MM/DD/YYYY)                       |
|   |                                       |                       |   | Citizensinp               | (IVIIVI) DD) 1111)                               |
|   |                                       |                       |   |                           |  |
|   |                                       |                       |   |                           |  |
| Personal Finan  | icial Support                         |                       |   |                           |  |
| that are applicable.  |                                       | .S. Dollars (USD). If |   |                           | e three sections below<br>any category, you must |
| Personal Support:   | My personal financia                  | I resources at this   | time are \$   | USD.                      |  |
| Certified by Bank   | Official:                             |                       |   |                           |  |
| I certify that the current balance in the applicant's account at this bank is: \$ on (date) |                                       |                       |   |                           | (date)   |
| Signature:  |                                       |                       |   |                           |  |
| Name/Title:   |                                       |                       |   |                           |  |
| Bank Name:  |                                       |                       |   |                           |  |
| Address:  |                                       |                       |   |                           |  |
| Official Bank Seal o  | or Stamp:                             |                       |   |                           |  |
|   |                                       | $\neg$                |   |                           |  |
|   |                                       |                       |   |                           |  |
|   |                                       |                       |   |                           |  |
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|   |                                       |                       |   |                           |  |
|   |                                       |                       |   |                           |  |
|   |                                       |                       |   |                           |  |
|   |                                       |                       |   |                           |  |



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| Private Support/Sponsor   |
|---|
| I guarantee, without reservation, to support the educational costs and living expenses, including tuition fees, books and supplies, room and board, health insurance, medical or emergency expenses, travel and other miscellaneous expenses for (print name of student):  University, San Bernardino. I also agree to furnish additional support for this student's dependents as listed previously on this form or any other that may later come to the United States. I further guarantee that the student will not become a public charge during his/her stay in the United States. |
| Sponsor's Name (Print):  Date:  |
| Sponsor's Signature:  |
| Relationship to Applicant:  |
| Address:  |
| Certified by Bank Official:   |
| I certify that the current balance in the applicant's account at this bank is: \$ on (date)   |
| Signature:  |
| Name/Title:   |
| Bank Name:  |
| Address:  |
| Official Bank Seal or Stamp:  |
|   |
|   |
| Government, Foundation Agency or Corporate Fellow Support   |
| Please submit this form to the agency providing your financial support for certification of the required information or instruct the agency to send a letter to the International Student Admissions Office as well as the Student Accounts Office at California State University, San Bernardino specifying the amount of the award, period of support, and any condition or terms that pertain.   |
| Agency Name:  |
| Address:  |
| I certify that the agency named above will provide the applicant the equivalent of \$ USD per year for the duration of his/her studies.   |
| (Continue next page)  |



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| Print Name of Agency Official:  | Date:  |
|---|--------|
| Signature of Agency Official:   | Title: |
| Address:  |        |
| Certification by Applicant  |        |
| The above information is complete and correct to the best of my knowledge | ge.    |
| Print Name:   |        |
| Signature:  | Date:  |
|   |        |

Revised: 06/25/2024