

THE STATE UNIVERSITY of NEW YORK FOREIGN STUDENT FINANCIAL STATEMENT

This is a two-page form. Be sure to read all information before completing this form.

Par	t 1 – Write in ink or type:							
1. Name of Applicant [] Mr. [] Ms.:				,			48.18.	
2. Permanent Address				(First/ Given)			(Middle)	
3. Campus to which you are applying:				4. Major field/department:				
5. Degree for which you are applying:				6. I expect my program of study to take			years to complete.	
7. Birth-date:/			8	8. Country of Citizenship:				
	[] I plan to come without dependents [] The following dependents will accompany me (list names and relationships)			Does your country restrict dollar exchange? [] Yes [] No What is the maximum dollar amount permitted for a student? \$				
11. Total amount of U.S. dollars you expect to bring with you upon arrival (tuition, room, meals, and books must be paid at the beginning of each semester). \$				 12. Do you have a source within the U.S. for emergency funds once you arrive in this country? [] Yes [] No 13. If YES, name source				
<u>Par</u>	t II - Complete each relevant item below. Sign	and date the	form after (<u>(C).</u>				
	Enter amount of assur	ed support av	/ailable for e	ach year of	study in U.	S. dollars.		
	Source of Funds	Year 1	Year 2	Year 3	Year 4	Require	d Verification	
Nam	onal Savings e of Bank bunt Holder	\$	\$	\$	\$	Bank Stateme Complete (A)		
Nam Nam	ily/Relative/Sponsor ee e	\$	\$	\$	\$	Bank Stateme Complete (A)		
						Official award	letter. See instructions	
	olarship/Loan Awarded by	\$	\$	\$	\$	on reverse sid	e letter. See instructions e	
Government/Employer/Other Name of sponsor		\$	\$	\$	\$	Official letter of instructions or instructions.	of support. See	
Other (specify source and type of support)						statements 3. Complete (C)		
T-4-		•	<u></u>	•				
Tota		\$	\$	\$	\$			
A.	ERIFICATION: This is to certify that the funds indicated above are on deposit or are being held in the name of the applicant, his family members, or sponsors (named above) at the savings institution named below. (Verification of amounts is without liability for the bank or its officials). Attach separate statement of accounts with official signature/seal.							
	Name of Bank				Date			
	Bank Official's Title				Bank Official's Signature/Seal			
B.	is certify that I (we) the undersigned have agreed to provide the funds indicated above to the applicant for the purpose of full-time study at the State University inpus listed above and that I (we) are submitting bank statements indicating the availability of these funds. I (we) further understand that the State University cannot dide ANY financial assistance to the applicant and that I (we) must provide these funds for the duration of the applicant's course of study. If the commitment is not the student may be subject to dismissal from the University for non-payment.							
	Sponsor Signature					Relationship to applicant		
	Sponsor Signature				Date to a		Relationship o applicant	
C.	This is to certify that the information given on this form is c will result in an automatic denial of admission, or cancellation Applicant's Signature	complete and according of registration	curate to the be	est of my know	ledge. I am			



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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. 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.

Source of Funds: Required Documentation:

Personal/Family: Signatures of sponsors on this form. Bank verification on both this form and in a separate state 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: \$2,600 per calendar yearFor each child: \$1,400 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 completed applications.