International Student Financial Support Form

This form, along with certified financial documentation must be submitted before I-20 or DS-2019 can be issued.

Name: ___________________________________________________ ______________________________

Family/Last Name Given/First Name Middle Name

Date of Birth: ______________________

mm/dd/yyyy

All international students who need to obtain a new I-20 or DS-2019 must show proof of sufficient funds to cover a full year of expenses at Pellissippi State Community College. Below are the estimated expenses for the upcoming academic year.

**Estimated Costs of Attendance for Fall & Spring 2016-2017**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition (12 credit hours x 2 semesters)</td>
<td>$16,156.00</td>
</tr>
<tr>
<td>Health Insurance (2 semesters)</td>
<td>$1,196.00</td>
</tr>
<tr>
<td>Total Tuition and Fees for 2 Terms</td>
<td>$17,352.00</td>
</tr>
<tr>
<td>Estimated Books and Supplies</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>Estimated Housing</td>
<td>$8,400.00</td>
</tr>
<tr>
<td>Estimated Food</td>
<td>$3,000.00</td>
</tr>
<tr>
<td>Miscellaneous (Travel, Transportation)</td>
<td>$2,500.00</td>
</tr>
<tr>
<td>Total Living Expenses for 12 months</td>
<td>$14,900.00</td>
</tr>
</tbody>
</table>

**Total for 12 Months:** $32,252.00

*Please note that these figures are the current estimates. Costs may actually be greater due to inflation and other cost increases.*

Add $6,000 living expenses for a spouse, $4,000 for each child, and $6,000 for summer school. Estimated insurance expenses per year are $2,000 for a spouse, $1,000 for each child.

Financial documents must be original and translated into English and dated less than one year from the first day of classes. If the currency is not in U.S. dollars (USD), the exchange rate for USD must be listed. All documentation must be certified – signed and stamped by a bank official. Acceptable documentation includes:

- bank account balance statements;
- or letters written by financial institutions with explicit numerical balances;
- or official scholarship or award letter from sponsoring agency or Government;
- and the funds must be “liquid”: meaning that the funds could be withdrawn at any time.

The following financial documents will not be accepted:

- Business accounts
- Insurance policies
- Salary statements
- Investment statements
- Real estate documentation
International Student Financial Support Form

I. Source of Support: (check all that apply)
   □ I will pay for school with my personal funds.
   □ I will be sponsored by another individual, i.e. parents, family member, other person. *If this item is selected, complete Affidavit of Support below.
   □ I will be sponsored by the government of my home country.
   □ I have a scholarship funding at least a portion of my program.

II. Sources of Funds (Amounts in this section must match attached financial documents):

<table>
<thead>
<tr>
<th>Source of Funding</th>
<th>Amount of Funding</th>
<th>Attached Letter or Financial Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

III. Affidavit of Support
- I certify that I have read and fully understand the above.
- I further certify that I have the financial resources to cover the indicated expenses for the student while he/she is in the United States.
- I understand that the failure to include any information, including the official financial documents, will hinder processing of the student’s application and issuance of the I-20 or DS-2019.
- I understand that the inclusion of any false information concerning financial support will be considered grounds for the student’s dismissal from Pellissippi State Community College and could result in the termination of the student’s SEVIS record.
- A certified bank statement or letter as described above is attached to this form.

__________________________________ ________________________________  _____________________________________
Name of Student or Financial Sponsor Relationship to Student Date
__________________________________
Signature of Above

IV. Student Declaration of Accuracy

I certify that the information given on this form is complete and accurate to the best of my knowledge. I am fully aware that any false or misleading information will result in disciplinary action and possible termination of my SEVIS record.

_________________________ ___________________________ _____________________________
Name Signature Date