

Please Print Clearly

Student Applicant Information

FAMILY/LAST NAME	FIRST NAME (as it appears in	n passport)	IUSB ID#
PERSONAL E-MAIL		BIRTH DATE (month-day-ye	ar)

IU South Bend requires all supporting financial documentation to be dated and original. Photocopies, faxes and scanned attachments cannot be accepted for the purpose of I-20 issuance. Supporting bank statements are required for each sponsor listed below. All financial documentation is valid for one calendar year from the desired date of enrollment. Foreign currency must convert to equal one year of funding in US dollars. In signing this affidavit, the sponsor agrees to undertake sponsorship for the full duration of the student's studies, unless otherwise indicated.

Sponsor A:

	FIRST NAME	MIDDLE NAME	RELATIONSHIP TO STUDENT
CHECK LEVEL OF GUARAN	ITEED FINANCIAL SUPPORT		
	□ TUITION & FEES*	\$	
	LIVING EXPENSES	\$	-
	□ MISC. EXPENSES	\$	
	*Estimated costs listed on re	everse side.	-
BANK/BUSINESS NAME &	ADDRESS		
CITY	COUNTRY	P	OSTAL CODE
СІТҮ	COUNTRY	Р	OSTAL CODE
I fully understand my resp	ponsibilities as a sponsor and will maintain the purpose of issuing a U.S. visa documen	P n the financial solvency to fund the student as indic t and all financial statements submitted are of my o	ated above for the stated amount. I an
I fully understand my resp signing this affidavit for th	ponsibilities as a sponsor and will maintain the purpose of issuing a U.S. visa documen	the financial solvency to fund the student as indic	ated above for the stated amount. I an
I fully understand my resp signing this affidavit for th	ponsibilities as a sponsor and will maintain the purpose of issuing a U.S. visa documen	the financial solvency to fund the student as indic	ated above for the stated amount. I an

Sponsor B:

FAMILY/LAST NAME	FIRST NAME	MIDDLE NAME	RELATIONSHIP TO STUDENT	
CHECK LEVEL OF GU	ARANTEED FINANCIAL SUPPORT			
	TUITION & FEES*	\$		
	LIVING EXPENSES	\$	_	
	□ MISC. EXPENSES	\$	_	
	*Estimated costs listed on re	everse side.	=	
BANK/BUSINESS NAM	IE & ADDRESS			
CITY COUNTRY		F	POSTAL CODE	
0111				
	responsibilities as a sponsor and will maintain	the financial solvency to fund the student as indi	cated above for the stated amount I am	
l fully understand my signing this affidavit f	for the purpose of issuing a U.S. visa documen	n the financial solvency to fund the student as indic t and all financial statements submitted are of my		
l fully understand my signing this affidavit f				
l fully understand my signing this affidavit f	for the purpose of issuing a U.S. visa documen			
l fully understand my signing this affidavit f	for the purpose of issuing a U.S. visa documen		ownership. Should any information prove	
I fully understand my signing this affidavit f false, IU South Bend	for the purpose of issuing a U.S. visa documen	it and all financial statements submitted are of my	ownership. Should any information prove	

1700 Mishawaka Ave PO Box 7111 • South Bend, IN 46634-7111 • 574-520-4419 • fax 574-520-4590 • <u>oiss@iusb.edu</u> <u>www.iusb.edu/oiss</u>

> **W** INDIANA UNIVERSITY SOUTH BEND



Funding Requirements for I-20 Issuance

2013-2014 Estimated Costs for First Year of Attendance

Undergraduate		Graduate (Business)		
Tuition & Fees	\$14,508	Tuition & Fees	\$11,696	
Housing	\$10,220	Housing	\$10,220	
Miscellaneous	\$3,900	Miscellaneous	\$3,900	
TOTAL	\$28,628	TOTAL	\$25,816	
Graduate (Nursing)		Graduate (Non-Business)		
Tuition & Fees	\$16,384	Tuition & Fees	\$10,405	
Housing	\$10,220	Housing	\$10,220	
Miscellaneous	\$3,900	Miscellaneous	\$3,900	
TOTAL	\$30,504	TOTAL	\$24,525	

* Estimates are based on full-time enrollment for the nine-month academic year (12 credit hours per semester for undergraduates/8 credit hours per semester for graduates); mandatory health insurance costs are for 12 months. Summer tuition and expenses are not included. These estimates are based on the needs of an average student without dependents. Costs increase annually and are subject to change without notice.

Funding Requirements for Dependents

Dependents in F-2 status require additional yearly funding:

- 1st Dependent: \$6,000
- Each additional dependent: \$2,000

Submit a copy of each dependent's passport identification page and birth certificate or marriage certificate, as appropriate. Documents must be translated into English.

Proof of financial documentation

Acceptable

- Bank statements indicating required currency
 amount
- Investment statements indicating liquid assets
- Scholarship letters
- Lines of credit
- Governmental funding

Unacceptable

- Chartered accountant statements
- Payroll reports/expected income
- Tax statements
- Property assessments
- Credit cards
- Bank statements lacking currency amounts
- Other statements of non-liquid assets

Duration of Studies

The length of the average undergraduate program is 60 months (5 years). The length of the average graduate program is 36 months (3 years). Unless otherwise noted, sponsorship is expected for the duration of studies.

Page 2 of 2

www.iusb.edu/oiss/docs/Affidavit.pdf

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