

Declaration & Certification of Finances (DCF) for Graduate Students Spring 2024 – Fall 2024

In order to receive an I-20 or DS-2019, please submit the following information along with this form:

1. Financial documentation showing funds available for at least one academic year's worth of expenses (refer to the table below). Financial documents must be dated within one year of your program start date.
2. Copy of the biographical page of your passport

The following amounts are **estimates** subject to change at any time and may not include upcoming tuition or fee increases. The estimates do not include expenses for summer classes or summer living expenses.

Tuition & Fees	\$16,009	Based on one academic year (two semesters) for a full-time student
Living Expenses	\$11,697	Off-campus cost for one academic year (two semesters)
Health Insurance	\$1,266	Student health insurance for one year
Personal Expenses & Books	\$2,400	Books for one academic year & other miscellaneous costs
TOTAL	\$31,372	

*The following programs have special tuition and fees: Master of Public Health, Master of Fine & Applied Arts, Joint PhD in Nursing, Joint Audiology, Nursing Anesthesia, MTax Direct, and Saturday MBA. Please contact the International Center if you have questions about fees.

**If you have a 12-month Graduate Assistantship (GA) contract, your estimated cost is based on 12 months (Fall, Spring, and Summer). You will be required to enroll full-time in Fall and Spring, and 6 credits in Summer. The estimated cost is \$40,573.

1. If you bring dependents (spouse and/or child(ren)), you will need to add **\$3,855 per dependent** (\$5,140 per dependent for students relying on a 12-month GA contract) to the total.
2. The bank statement or letter from a bank must be in English and on bank letterhead or official bank paper.
3. If the balance is not listed in US Dollars (USD), it should clearly indicate the currency used.
4. **Scanned copies may be emailed** but must be of good quality and legible.

PART 1 (TO BE COMPLETED BY THE STUDENT):

Name of Student: _____ Student ID# (if known): _____
(Last name, First name as it appears on your passport)

Date of Birth: _____ Are you currently in the USA? Yes ☐ No ☐ If yes, what is your current visa status: _____

Check each box that applies to you:

- ☐ I have my own funds to support my studies. The amount of funding is \$_____ USD, and I **will be able to provide this amount each year.** (Attach a copy of your financial documentation.)
- ☐ I will be supported by a sponsor(s). (Your sponsor(s) must complete Part 2 of this form and submit a copy of their financial documentation.)
- ☐ I have a scholarship (government, athletic, academic, etc.). (Include a copy of your scholarship letter.)
- ☐ I am planning to bring dependent(s). (Complete Part 3.)

I certify that the information provided on this form is correct and complete. Likewise, I acknowledge that it is my responsibility to notify the International Center of any changes in this information and/or in my financial circumstances.

Student's Signature: _____ Date: _____

PART 2 (TO BE COMPLETED BY THE SPONSOR OF THE STUDENT):

I certify that I am the financial sponsor of _____ *(please enter student's name)*. I am providing financial support in the amount of USD \$ _____ per year to cover the costs associated with the student's education. *(Please attach a copy of your financial documentation.)*

Relationship to the student: _____ *(example: parent, friend, employer, etc.)*

(If you are a U.S. Citizen/Permanent Resident planning to sponsor an international student who is going to apply for an F-1 or J-1 visa, you should send the original I-134 and supporting financial documentation to the student to submit to the U.S. Embassy during their visa application process. The form can be downloaded from <http://www.uscis.gov>.)

Sponsor's Full Name: _____

Signature: _____ Date: _____

Must be signed in wet ink. We can't accept a typed name or initials (must be a full signature). We will accept signatures written in languages other than English.

PART 3 (TO BE COMPLETED BY THE STUDENT – Only if bringing dependents):

(If you will be bringing your spouse and/or child(ren), complete the chart below. Otherwise, please leave this section blank).

This information will be used to issue the dependent I-20(s) or DS-2019(s) for your spouse and/or child(ren):

Family (Last) Name, First Name(s)	Date of Birth (mm/dd/yyyy)	Country of Birth	Country of Citizenship	Gender	Relationship (Spouse or Child)

1. You must submit copies of passports for all of your dependents.
2. If bringing your spouse, submit a copy of your marriage certificate (with a certified English translation).
3. If bringing your child(ren), submit a copy or copies of their birth certificate(s) (with a certified English translation).
4. If your dependents are seeking J-2 status, we will also need the following information for each dependent: (1) city of birth and (2) country of permanent residence.

If bringing your spouse, provide his/her email address: _____