FINANCIAL SPONSOR FORM

For Undergraduate International Student Application

IMPORTANT: RETURN THIS WITH YOUR APPLICATION FOR ADMISSION.
FAILURE TO RESPOND TO ALL QUESTIONS, REQUIREMENTS, AND BLANKS WILL DELAY THE PROCESS OF ADMISSION.

- Admission will be denied if student indicates insufficient amount of support to cover cost.
- The <u>ESTIMATED</u> cost of attending SMSU for a school year is approximately \$22,500. Verification of an additional \$5,000 is needed if you are bringing a spouse/first dependent and \$3,000 for each additional dependent.
- The U.S. Federal Regulations require that admission decisions be based on academic acceptance and evidence of adequate funds to meet college expenses for the first year and for the entire period you plan to study in the United States.
- There is no financial aid and very limited on-campus work opportunities for students holding student visas (F-1). You are not permitted to work full-time during the nine-month academic year. Dependents of F-1 visa holders, having an F-2 visa, are never permitted to work.

Your chances of working on campus the first year are limited; not all students who are looking for work may get a job. Please understand that your sponsor must be willing to cover your expenses for the entire two/four years.

- The lack of adequate financial resources, as stated above, will jeopardize your status as a student in the U.S.
- Please be aware that tuition must be paid in full by the university deadlines or your classes can be canceled. You are required to pay
 \$3,000 as down payment during orientation before you can enroll for classes.

All areas must be signed and all appropriate sections must be completed or the form will be returned to the student for completion.

.PPLICANT'S NAME	(Last or Family Name)	(First or Given Name)		(Middle Name)		
PLEASE INDICATE TH	IE SOURCES OF FINANCIAL SUPPO	ORT AND AMOUNT YOU ANTICIPAT	E RECEIVING	IN U.S. DOLLARS		
Personal (student) Re	esources:					
(Original bank statem		U.S. \$				
Parent or Sponsor	Resources:					
	icial Certification Form and original bank statement must be enclosed) PARENT SPONSOR MUST SIGN ON SIDE 2 OF THIS FORM					
Government Scholars (A signed copy of you	hip: r letter of award must be end	closed.)		U.S. \$		
Other Sources: (Please specify and p	es.)	U.S. \$				
			•	U.S. \$		
				U.S. \$		
	ld be equal to or higher than \$22, esota State University for a calend		*Total (required)	U.S. \$		

-Please Turn Over-



Please email form to:

OFFICIAL CERTIFICATION OF SOURCES OF FUNDS

and amounts from parents or sponsor

PARENT OR SPONSOR: Please fill out information below.

I certify with my signature that I have read the information furnished by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.

(Name of parent, relative, sponsor)	(Relationship to applicant)						
(Street and Number)	(City)	(State/Co	ountry)	(Zip)		
(Sponsor's Email Address)			(Sponsor's Phone Number - include country code)				
Are you sponsoring any other student currently studying in the U.S.?			Yes	No			
If yes, student's name (please print):							
School student is attending:							
I agree: By providing my contact informat balances on the student's account.	ion I agree that I may be o	contacted by s	taff of SM	SU regarding any	overdue unpaid		
(SIGNATURE OF PARENT, RELATIVE, C	DR SPONSOR) (D.	 ATE)					
(SIGNATURE OF NOTARY PUBLIC/LEG	AL ADVOCATE) (D	ATE)		Stamp for No or Legal Au	tary Public uthority		
OFFICIAL CERTIFICATION OF SOURCE	CES OF FUNDS AND AN	MOUNTS					
APPLICANT: Please provide the REQUITHE signature and date must be provide		, BOTH spaces	s for U.S.	dollar amounts r	nust be filled in.		
I certify with my signature that the total amount of (including funds for spouse and children, when applithat the information provided is correct and completed understand that inaccurate information can be call	money that I have for my first y licable), and the total amount av te and that I shall notify Southv	railable for each si vest Minnesota St	ubsequent ye tate Universit	ear of study is \$ ty of any change in my	Further, I certify		
(SIGNATURE OF STUR				(DATE			

IF ANY DEPENDENTS (SPOUSE OR CHILDREN) WILL BE ACCOMPANYING THE STUDENT, SMSU WILL NEED A COPY OF EACH DEPENDENT'S PASSPORT ALONG WITH A COPY OF THE MARRIAGE CERTIFICATE FOR THE SPOUSE AND THE BIRTH CERTIFICATE OF EACH CHILD.