

Waynesburg University Confidential Declaration of Finances

The United States Immigration and Naturalization Services (INS) requires ALL prospective international students to submit a form documenting enough financial support to cover the cost of their U.S. education. We cannot authorize your "Certificate of Eligibility" (INS form 1-20 or DS - 2019) until this form has been fully completed and returned to Waynesburg University. Do NOT leave blank spaces. If an item does not apply to you, print "N/A" in the appropriate space. A copy of this document will be sent to you with your 1-20 or DS - 2019. You must show both forms to the U.S. Embassy/Consulate in your country to obtain your visa.

Waynesburg University Estimated Costs for 2024-2025

Tuition and Fees	\$30,480
Room and Board	\$13,340
Books and Personal Expenses	\$ 2,600
Health Insurance*	<u>\$ 1,000</u>
Total Estimated Cost	<u>\$47,420</u>

Dependents (if applicable) \$ 4,180

***Students may have health insurance that will apply while in the US.**

Personal Information

Date of application _____/_____/_____
 Month Day Year

Name of Applicant: _____
 Family Name Given Name Middle Name

Date of Birth: _____/_____/_____
 Month Day Year Place of Birth (country) Country of Citizenship

Financial Support

Enter the expected amount of annual support toward your educational costs from the sources listed below.

Note: Each person or source of finances listed below must have supporting documentation (bank statements, employment letter, tax document, or award notice) or it will not be included in the total. The name on the supporting document should match the name listed under "source" below and the student's name should be clearly marked on the supporting document. All documents should include a date. Original and certified documents are a must!

Please see chart on next page.

Sources	Amount (in US Dollars)
Family or legal guardian support (financial income) Name: _____ Name: _____	
Additional family assets (savings, investments, assets)	
Relatives and friends Name Sponsor #1: _____	
Relatives and friends Name Sponsor #2: _____	
Relatives and friends Name Sponsor #3: _____	
Government, Agency, or Foundation: Name of source: _____	
Total funds available *Must equal or exceed total estimated cost	

To Be Signed By Bank Official Only

I certify that I have read the information provided by the applicant on this form, that is true and accurate, and the account funds stated are available as of this date.

Bank Name: _____

Bank Address: _____

Name of Bank Official _____ Title _____

Signature of official _____ Date ____/____/____
 Month Day Year

To Be Signed By Parent Or Sponsor Only

I certify that I have read the information provided by the applicant on this form, that it is true and accurate, and I will provide funding as indicated.

Parent or Sponsor's Name _____

Relationship to student _____

Address _____

Signature of sponsor _____ Date ____/____/____
Month Day Year

Complete the Following Information for Each of Your Dependents

First dependent's name _____

Relationship to student _____ Country of Birth _____

Date of Birth: ____/____/____
Month/day/year

This dependent will come to the U.S. to live with the student? ___ Yes ___ No

Second dependent's name _____

Relationship to student _____ Country of Birth _____

Date of Birth: ____/____/____
Month/day/year

This dependent will come to the U.S. to live with the student? ___ Yes ___ No

Note: For each dependent coming to the U.S. an additional \$4,180 must be verified.

General Information

Does your government currently impose restrictions on exchange or release of funds for study in the U.S.? ___Yes ___No

What is the approximate cost of travel from your home to Waynesburg University (in U.S. dollars)? _____

How will this travel expense be paid?

I certify that the information on this form is true, correct, and complete. Waynesburg University has my permission to verify the information by obtaining documentation as needed.

Student's Signature Date ____/____/____
Month Day Year

To Be Completed By Waynesburg University

I certify that I have reviewed this declaration and all attached documents, and approve issuance of a Certificate of Eligibility (for F-1 visa or J-1 Visa).

Authorizing signature

Date