Certification of Finances Form

Pease submit this completed form to the address below.

This Certification of Finances Form is intended to provide Westfield State University with information

regarding funds available to an international applicant, more specifically, to verify that the student has access to sufficient financial resources to attend the University. This form is required by the U.S.

Citizenship and Immigration Services (USCIS) and must be completed to be valid. A Certificate of Eligibility (I-20) will not be issued until this form is completed and returned to the University. No other form may be used as a sub-stitute. In addition to this form, all students must submit a bank statement.

Westfield State University requires that all F-1 and J-1 visa status applicants provide verification of finances in the amount of \$30,000 (U.S. Dollars) or greater through any combination of personal or sponsored funding. This amount is the estimated total tuition and expenses for one year of academic study.

- If you the student will provide funding from personal funds, a bank letter with sufficient funding for at least one year's total cost is required, along with this form. The bank letter must be in English and clearly detail the ac-count owner and available funds.
- If a family member or other personal sponsor will provide funding, a bank letter with sufficient funding for at least one year's total cost is required, along with this form verifying sponsorship. The bank letter must be in English and clearly detail the account owner and available funds.
- If an employer, government, or organization will provide funding, a signed financial guarantee letter from the sponsor detailing amounts and length of sponsorship is required. This form can accompany the guarantee let-ter from the sponsor, but not replace it.

All personal bank and sponsor letters must be dated within six months from the date of application to the University. Please understand that you are responsible for all payments to the University.

| SIGNATURE OF STUDENT | | | | | |
|-------------------------------------|------|------------------------|----------|---------|--|
| APPLICANT'S NAME | | | | | |
| LAST/FAMILY | | FIRST/GIVEN | | MIDDLE | |
| PERSONAL INFORMATION | | | | | |
| PERMANENT ADDRESS | CITY | STATE | ZIP CODE | COUNTRY | |
| MAILING ADDRESS (IF DIFFERENT) CITY | | STATE | ZIP CODE | COUNTRY | |
| INTERNATIONAL ADDRESS | | | | | |
| E-MAIL ADDRESS | | HOME TELEPHONE | | | |
| | | | | | |
| DATE OF BIRTH | | COUNTRY OF CITIZENSHIP | | | |

SEND APPLICATION MATERIALS TO:

Admission Office Westfield State University P.O. Box 1630 Westfield, MA 01086-1630 Phone: (413) 579-3040 Fax: (413) 579-3019



Enter the expected amount of annual support from the sources listed below in U.S. dollars (USD).

SOURCES OF FUNDS

PERSONAL OR FAMILY SAVINGS

A bank official's signature is required if the student is partially or totally supported by personal savings.

| BANK | ACCOUNT HOLDER | | AMOUNT (USD): |
|-------------------------------------|--|---------------|---------------|
| | | | |
| PARENTS | | | |
| This includes money available from | m sources other than personal or family savings. | | |
| | | | |
| FATHER | | AMOUNT (USD) | |
| | | | |
| MOTHER | | AMOUNT (USD): | |
| | | | |
| PLEASE DESCRIBE THE SOURCE(S) | | | |
| | | | |
| SPONSORS | | | |
| | | | |
| This includes money available from | m sources other than parents. | | |
| SPONSOR | | AMOUNT (USD) | |
| SPONSOR | | AMOUNT (USD) | |
| SPONSOR | | AMOUNT (USD): | |
| | | , (332), | |
| PLEASE DESCRIBE THE SOURCE(S) | | | |
| | | | |
| | | | |
| YOUR GOVERNMENT | | | |
| Enclose a signed copy of your lette | er of award. | | |
| | | | |
| AGENCY | | AMOUNT (USD) | |
| | | | |
| | | | |
| | | | |
| | | TOTAL (USD) | |

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| DO YOU HAVE A SOURCE FOR EMERGENCY FUNDS? IF YES, NAME THE SOURCE AND AMOUNT IN U.S. DOLLARS (USD). | | | | |
|---|---|--|--|--|
| | | | | |
| | | | | |
| HOW WILL YOU PAY FOR YOUR TRANSPORTATION TO THE U.S.? | | | | |
| | | | | |
| OFFICIAL CERTIFICATION OF SOURCES OF FUNDS & A | AMOUNTS | | | |
| This is to certify that I have read the information furnished by the application that I have read the information furnished by the application are available and will be provided as indicated. | cant on this form, that it is a true and accurate statement, and that | | | |
| PERSONAL OR FAMILY SAVINGS | | | | |
| SIGNATURE OF BANK OFFICIAL | DATE | | | |
| TITLE OF BANK OFFICIAL | | | | |
| NAME OF BANK ADD | RESS OF BANK | | | |
| PARENTS | | | | |
| SIGNATURE OF PARENT(S) | DATE | | | |
| ADDRESS OF PARENT(S) | | | | |
| SPONSORS | | | | |
| SIGNATURE OF SPONSOR(S) | DATE | | | |
| RELATIONSHIP OF SPONSOR(S) TO STUDENT | | | | |

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ADDRESS OF SPONSOR(S)

