

Family of Faith College

Confidential Financial Statement

The United States Department of Homeland Security (DHS) regulations require international student applicants to have adequate financial resources to provide for all educational expenses. Since Family of Faith College bears the responsibility of ensuring that you are in compliance with DHS regulations, we require a guarantee of financial resources. Your financial statement must equal or exceed one year of expenses for the program of interest. An I-20 form will only be issued after you are accepted and we have assurance that you have full financial support. **All international students must take at least 12 credit hours every semester. Dropping below full-time can put a student's visa status in jeopardy.**

Cost of Attendance for One Academic Year:	Application Fee	\$ 25.00
	Tuition (30 credit hours @ \$165 per credit hour)	4,950.00 *
	Fees	360.00
	Books	1,200.00
	Room and Board	9,081.00
	Miscellaneous	7,748.00
	Estimated Cost of Attendance	\$23,364.00 **

All dollar amounts
are in U.S. dollars

* Note: This is an average tuition. This will increase or decrease depending on the actual number of credit hours taken.

**Please be aware that the final cost of attendance may vary based on the actual costs of books, room, board, medical insurance, supplies, and personal lifestyle. In addition, be advised that additional annual funds of \$3,000 for a spouse and \$1,200 for each child must be available to support dependents.

Applicant Information (Please Print)

Name _____ Birth Date _____
Last First Middle MM / DD / YYYY

Country of Citizenship _____ Country of Birth _____

Home Country Permanent Address _____

United States Mailing Address (if applicable) _____

If your children and/or spouse are coming to the U.S., please provide the following information for each family member. If more than two children, record on a separate sheet of paper and attach it to this form.

Spouse Name _____ Birth Date _____ Birth Country _____
Last First Middle MM / DD / YYYY

Child Name _____ Male or Female _____ Birth Date _____ Birth Country _____
Last First Middle MM / DD / YYYY

Child Name _____ Male or Female _____ Birth Date _____ Birth Country _____
Last First Middle MM / DD / YYYY

Desired Visa Status: F-1 (student) _____ or Other (Specify) _____

Current Visa Status (if in the United States) _____

INS Admission Number (from I-94 card if you have previously entered the U.S.) _____

Applicant's Financial Declaration (Please Print) Student's financial support stated in U.S. Dollars:

Personal Funds	\$ _____	
Family Funds	\$ _____	(Identify source) _____
Other Funds	\$ _____	(Identify source) _____
TOTAL	\$ _____	(Must be equal to or greater than one year's cost of attendance)

You must submit a current (no more than one year old) Guarantor Certification and Bank Certification for each financial support source.

Applicant's Statement: I certify that I am aware of all the expenses that will be incurred while attending Family of Faith College and that I and/or my sponsor are prepared to pay all annual expenses until my program is completed.

Signature _____ Date _____