



CONFIDENTIAL DECLARATION OF FINANCES

FOR INTERNATIONAL APPLICANTS – IELI PROGRAM AT SPRINGFIELD COLLEGE

The purpose of this form is to certify that you will have the sum of \$29,040 for the Intensive English Language Institute (IELI) for the 2020- 2021 academic year at Springfield College. A certificate of eligibility (Form I-20 or DS-2019) for a student (F) or an exchange visitor (J) visa will not be issued unless this form is completed and the necessary certifications are obtained. You should make copies of this form and required documents before returning them to Springfield College, as you will most likely need to show proof of adequate funding to US consular officials when applying for a visa. If this form is returned via email or fax, no I-20 or DS-2019 can be issued until the original form with your student signature is received by the International Center at Springfield College. You should not look to employment at Springfield College as a means of support while attending the IELI program. Spouses who accompany students to the US on the F2 visa are not permitted to accept any kind of paid employment in the US.

****If applying for Summer Session please insure that you have the finances necessary to accommodate that program. Summer session 2020: \$5,250.**

Part I: BASIC INFORMATION

A. NAME

LAST (FAMILY)

FIRST

Middle Initial

NICKNAME

*****ADDRESS (WHERE FORM I-20 SHOULD BE SENT)**

*****VISA CERTIFICATES CANNOT BE SENT TO P.O. BOXES**

STREET

CITY

POSTAL CODE

COUNTRY

PHONE: _____ EMAIL: _____

ANTICIPATED IELI TERM: FALL ____ SPRING ____ SUMMER SESSION: ____ YEAR 20____

B. DATE OF BIRTH: _____ COUNTRY OF BIRTH: _____

* MONTH/DAY/YEAR

COUNTRY OF CITIZENSHIP: _____

C. MARITAL STATUS: _____ MARRIED _____ NOT MARRIED

NUMBER OF CHILDREN: _____ MY CHILDREN _____ WILL JOIN ME _____ WILL NOT JOIN ME IN THE U.S.

****NOTE: IF YOUR SPOUSE WILL JOIN YOU IN THE UNITED STATES ADD AN EXTRA \$10,000 TO THE FIGURE WHICH YOU ARE REQUIRED TO CERTIFY. IF YOUR CHILD/CHILDREN WILL BE JOINING YOU, ADD \$5,000 PER CHILD.**

PART II: ESTIMATE OF IELI STUDENT EXPENSES FOR THE 2020 – 2021 ACADEMIC YEAR

Tuition	\$12,000
Room and Board	\$12,930
Fees / Health Insurance	\$4,110
Total	\$29,040

PART III: SOURCES OF FINANCIAL SUPPORT (U.S. DOLLARS) *additional documentation required; see below

Check all sponsors providing this funding:

Amount of each type of support:

___ My own personal funds USD \$: _____

___ Parents and or/sponsor's funds (family, friend, etc.) USD \$: _____

Person & relationship to you: _____

___ Home government funds/scholarship USD \$: _____

Agency name: _____

___ Other (specify): _____ USD \$: _____

Total amount of money you expect to have when you arrive at SC: USD \$: _____

***All applicants must show proof of finances.** Please obtain an **official letter or bank statement (s) from the bank** or financial institution in which you, and/or your sponsor, have available funds. This letter should be written on official letterhead, **in English**, and signed by a bank official. The letter should state the date the account was open, the currency type and specifically state an amount that is currently in the account. Bank letters dated more than six (6) months from the date of submission to Springfield College are considered expired. If dependents will accompany you, be sure to include the additional amounts for each dependent.

Organizations (government or private) sponsoring you must provide a letter of sponsorship on official letterhead with the organization's address, telephone and fax number, and the original signature and title of the responsible official. This letter should also include your full name, the specific dollar amount, and duration of the scholarship.

Section IV: Signatures (required)

This certifies that the total amount of money that I have available for my first year of English study/ specific IELI program at Springfield College (including funds for dependents, if applicable) is USD \$ _____. Further, I certify that all the above and attached information provided is correct and complete and that I will not require financial assistance from Springfield College.

Signature of Student *(required)*

Date

Signature of Sponsor/s *(required)*

Printed Name/s

Relationship to Student

Date

Signature/Seal of Bank Official *(required)*

Printed Name

Name of Bank *(required)*

Date