

To be completed by the student

To obtain your form I-20 and to request a student visa, you must certify that you have available financial resources to support a full course of study for one academic year. The U.S. Department of Homeland Security requires that a student be enrolled full-time to maintain student status. **Please download this form and complete in Adobe Acrobat Reader for best results. Do not handwrite responses unless absolutely necessary.**

UNDERGRADUATE	(<i>Estimated</i> based on 12 credit hours per semester for one academic year.)
Tuition & Fees - full time	US \$ 24,990.00*
Room	US \$ 8,052.00
Meals	US \$ 5076.00
Books & Supplies	US \$ 1,500.00
Medical Insurance	US \$ 3,606.00
Personal Expenses	US \$ 3,400.00
Total Minimum Budget	US \$ 46,624.00

**F-1 visa holders are assessed a \$300 international student fee each semester which is included in this figure. The fee is charged to aid in visa compliance support, international student programming, advocacy and general enrollment support from admission up to 36 months beyond graduation for those who participate in the OPT employment benefit, and supports the international alumni network.*

Personal Information

_____ Last Name (Surname) First Name (Given Name)

_____ Current Home Country Address (Line 1 - street address)

_____ Current Home Country Address (Line 2 - include city, postal code and country) Address valid until (mm-dd-yyyy)

_____ Phone Number City of Birth Country of Birth Country of Citizenship

_____ Date of Birth (mm-dd-yyyy) Email address

If you are currently or recently enrolled in a U.S. institution in F-1 international student or other status, please check the box and provide the name of the institution, city and state below:

_____ Institution's name City State

Dependents

List any dependents you plan to bring to the United States with you.

Name of Dependents:	Relationship:	Date and Place of Birth:	Nationality:	Email/Phone Number

For dependents (living expenses for spouse and/or child under 21 years old), the additional expense is U.S. \$6,000.00 per dependent per academic year. If you are married and plan to bring your spouse and/or children with you, you must certify additional support for each dependent. (Note: F-2 visa holders are NOT permitted to work under ANY circumstances).

This worksheet is to help you calculate financial support for the first year of your studies. Please note that only the first year of financial support is required for issuance of your form I-20.

Complete both pages of this form and include an Affidavit of Support form from each sponsor with their amount of support to equal the total amount of **\$43,686.00**. Affidavits from each sponsor must be attached. All verification of support must be dated no more than one year from the time of document submission. IPC will verify that you have the required amount to issue the form I-20 (F-1).

Sources of Support	Assured Support 1st Year of Study Amount in U.S. Dollars
1. Personal Savings Name of Bank 1: _____ Name Bank 2: _____ Attach current, official bank statement(s) and letter(s) and sign below.	
2. Parent and/or Sponsor Relationship to student _____ Name of Bank 1: _____ Name Bank 2: _____ Attach current, official bank statement(s) and letter(s) and sign below.	
3. Your Government Name of Government Sponsor _____ Attach Verification of Sponsorship.	
4. I have received a University Assistantship _____ Assistantships must be verified by the UNCG Graduate School	
5. Other (specify) _____ Attach Verification of Support.	
Grand Total	

Please Note: If financial support is to be provided by someone other than the applicant, the current (less than one year old) bank letter and statement must be accompanied by a signed affidavit from the owner of the account affirming the financial commitment to the student.

For student to complete and sign:

I, (student name) _____, certify that the total amount of money that I have available for my first academic year the University of North Carolina at Greensboro is U.S.\$ _____. Further, I certify the information provided on this form is correct and complete, that I shall not require additional financial assistance from the University of North Carolina at Greensboro, and that I have attached all appropriate supporting documents.

Student's Signature

Date: (mm-dd-yyyy)