

CERTIFICATION OF FINANCES

Please note: In order for your application to be considered complete, the Department of Homeland Security of the United States government requires the College to verify the financial resources of all international applicants. Form I-20 cannot be issued until this form is completed and we have received all supporting bank documents (unless your bank has certified this form).

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY. THIS FORM IS AN ESSENTIAL PART OF YOUR STUDENT VISA PROCESS.

The College of Idaho traditionally awards merit-based scholarships to a limited number of international applicants, and the scholarship letter can be included as a part of the overall funding amount. Students can also use loans, grants, and or scholarships from their home countries in order to demonstrate available funding.

The I-20 form, which indicates eligibility for a student visa, CANNOT BE ISSUED until an accepted student has submitted confirmation of attendance and the required deposit. This form will be used to enter the student's information into the US Immigration and Customs Enforcement (ICE) SEVIS system. Please print clearly in block letters or type your responses. The Certification of Finances and supporting bank statements, letters of certification of funds must:

- Demonstrate the availability of \$40,000 (based on the nine-month academic year);
- Contain original signatures and a bank stamp or seal;
- Express all monetary amounts in U.S. dollars.
- *This is an estimated cost. For current tuition and fee information and any questions regarding this form, contact the Office of Admission at admission@collegeofidaho.edu or see https://www.collegeofidaho.edu/admission-aid/cost.

PART I - APPLICANT INFORMATION	NC	
Full Name		
(Exactly as it appears on your passpo	ort)	
Complete Residential Address		
Number	& Street (Do not use P.O. Box)	City or Town
State	e & Postal Code	Country
Please note that according to current ICE Additionally, courier services will not deliv	= -	n address in their country of residence. Addresses may not be postal boxes.
Home Telephone ()		Fax Number ()
Country code/City cod	le	Country code/City code
Date of Birth /	/ Place of Birth	Citizenship
Month Day	Year C	ity/Country Country
Country issuing your passport	Passport Number	Expiration Date
Person in the United States to notify in ca	ase of emergency	()
	Name	Area code/Phone number
If you are currently in the United States:	Visa type I-94	4 number SEVIS ID number
Name of school or institution that issued	vour last I-20	
	Name	Phone Number
Applicant Certification		
I certify that all statements made on the above changes, it is my responsibility to		knowledge. I understand that if my financial circumstances or the information ediately.
Signature of Student		Date (month/day/year)

ESTIMATE OF ANNUAL EXPENSES (20	18-2019 ACAD	EMIC YEAR)		
Tuition and Fees Required Medical Insurance Housing and Meal plan Books and Supplies Misc. Expenses	\$30,155.0 \$1,800.0 \$9,700.0 \$1,200.0 \$1,500.0	00 00 00		
TOTAL FOR NINE-MONTH SCHOOL YEAR	\$44,355.0	00		
Summer session tuition (estimated two courses) Summer living expenses (estimated)	\$2,000.0 \$4,400.0			
TOTAL FOR 12-MONTH SCHOOL YEAR	\$50,755.0	00		
*I-20s will be issued for a nine-month academic year. Additional figures are estimates and are subject to change.	al figures are given for info	ormational purposes only to	assist applicants with b	oudget planning. All
PART II — STUDENT'S SOURCE OF FU	NDS <i>(Please cor</i>		ts in U.S. dollars.) projected for	future years
Personal funds				
Parent, Guardian, or Family Funds				
Private Sponsor				
Organization or Governmental Sponsor				
PART III — PARENT/SPONSOR CERTI Name Please Print or Type First Middle	FICATION	Relationship to	o Applicant	
Address				
Number & Street City of	or Town State 8	R Postal Code	Country	
I hereby certify that I have read the information on this f student the amount of \$ per y		e applicant, and I am willi ollars, for education exper		
Signature of Parent/Sponsor		Date		
Signature of Farenty openior		Dato	Month/Day	·/Year
*If a student has multiple sources of sponsorship, this s	ection should be copie	ed and completed by eac	ch sponsor.	
PART IV — BANK CERTIFICATION				
I certify that the person listed on this form as a sponsor knowledge, has the resources to provide the funds specimeet educational expenses at The College of Idaho. I under that of the firm or bank I represent.	cified in this form. These	e funds are available for t	transfer to the United	States to be used to
Name				
Please Print or Type First		Title		
Signature Middle	Last			
		Date	Month/Day/Year	
Bank or Institution Address			monun bay/ real	
Number & Street	City or Town	State & Postal Code	Country	

