

## Declaration of Finances (2009-10)

According to U.S. Visa regulations, you are required to prove that you will have adequate financial support while attending Bismarck State College. Indicate in U.S. dollars the amount of money that will be available to you annually from the sources specified below, and provide the appropriate supporting documents. You must show a source of full financial support for all years of attendance. Funds for the support of dependents accompanying you to the U.S. must also be included. A Certificate of Eligibility (Form I-20) will only be issued when you show satisfactory financial arrangements for meeting the expenses of your entire program of study at Bismarck State College.

* BUDGET (2008-09 Academic Year)	
Tuition	\$ 8,840.00
Fees	\$ 600.00
Room & Board	\$ 4,350.00
Misc Expenses (estimate)	\$ 3,000.00
Medical Insurance	\$ 900.00
<b>Total (Based on 15 credit hours)</b>	<b>\$ 17,690.00</b>

Name: \_\_\_\_\_

Permanent mailing Address: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

How long do you plan on studying at Bismarck State College?     1 year     2 years     3 years

Are you planning to live on campus?     Yes     No

How much money will you bring with you? \_\_\_\_\_

How many years are you guaranteed this financial support?     1 year     2 years     3 years

Source of Funds	Year 1	Year 2
<b>Self-support</b> Personal savings (Attach a statement of account from bank) Salary while on leave of absence (Attach statement from employer) Other income (Attach documentation)	\$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____
<b>Family/Sponsor Support</b> Savings (Sponsor's and bank official's signature below) Salaries (Attach a salary statement from employer) Other income (Attach documentation)	\$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____
<b>Scholarship/Fellowship/Assistantship</b> Agency _____ (Attach a letter from the sponsoring agency giving award details)	\$ _____	\$ _____
<b>Other Support</b> Type and source _____ (Attach a letter from the person or organization giving details of support)	\$ _____	\$ _____
<b>Total:</b> Each of these totals must equal the university's estimate of expenses for each calendar year.	\$ _____	\$ _____

Bank Official's Certification	Financial Sponsor's Certification
<p>This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available. This does not constitute a guarantee on the part of the bank.</p> <p>Bank official's name _____ (please print)</p> <p>Signature _____ (place stamp of bank over signature)</p> <p>Name of bank _____</p> <p>Address of bank _____</p> <p>_____</p> <p>Date ____/____/____ Month Day Year</p> <p><b>Please provide original or certified copy of bank statement</b></p>	<p>This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, that the funds are available, and that I will provide them as indicated.</p> <p>Sponsor's name _____ (please print)</p> <p>Signature _____ (parent or sponsor)</p> <p>Address _____</p> <p>Relationship of sponsor to student _____</p> <p>If sponsor resides in U.S., please indicate citizenship or immigration status: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Immigrant</p> <p><input type="checkbox"/> Non-immigrant (visa type) _____</p> <p><b>Please provide original or certified copy of bank statement</b></p>

Does your country have currency restrictions that limit the amount of money that may be released to you each year in U.S. dollars?  
 Yes  No If yes, please specify the amount allowed and for what period of time \_\_\_\_\_

What is the current rate of exchange for U.S. dollars in your country? \$1 (U.S) = \_\_\_\_\_

Do you have any dependents that will come with you to the U.S.?  Yes  No If yes, list name, relationship, birthdate, and country of birth of each. (You must show sufficient funds to cover your dependents' living expenses while in the U.S. – approximately \$4,000 for a nonstudent spouse, \$1,500.00 for the first child, and \$1,000 for each additional child.)

	Name	Relationship	Birthdate	Country of Birth	Passport # (if available)
1.	_____				
2.	_____				

**Please note: Your admission will NOT be processed without an official signature and certification from point of origin of funds (bank).**

My signature on this Declaration of Finances indicates that I understand that I am responsible for all tuition, fees, and living expenses that I incur during my attendance at Bismarck State College and that with the exception of any scholarship or assistantship already offered to me by the college, I do not expect Bismarck State College to provide me with financial assistance or employment. I also certify that the information provided here is correct and complete.

Student's signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Please print name \_\_\_\_\_  
(last or family) (first) (middle)

**Note: You are encouraged to keep copies of all financial documents submitted to BSC. The United State Consular office will require this information when you apply for your visa.**

**Return this form to:**

Bismarck State College  
International Admissions  
PO Box 5587  
Bismarck, ND 58506-5587  
U.S.A.