The purpose of the Certification of Finances is to help colleges and universities obtain complete and accurate information about the funds available to international applicants who want to study in the United States. Strict government regulations, rising education costs and economic conditions have made verifying the financial resources of international applicants essential. Institutions do not have the option of deciding whether to verify the financial resources of their international applicants; financial verification must be made prior to institutional issuance of a Certificate of Eligibility (Form I-20 or DS-2019).

This form is designed to standardize financial information provided by applicants to colleges, universities and U.S. consuls. By completing this form and returning it to the college or university requiring it, an applicant, if admitted, may obtain that college’s authorization and issuance of a Certificate of Eligibility (Form I-20 or DS-2019). If parents and/or sponsors are unable to obtain a bank official’s verification, it is recommended that institutions forward a copy of the International Student Financial Aid Application to the family for completion. The institution should attach a copy of this certification to the Certificate of Eligibility. U.S. consuls scrutinize the statements of financial resources given by nonimmigrant visa applicants. This certification will help such officials make their decisions and expedite visa issuance.

Return this form directly to the college that provided or requested it. Do not send it to the College Board.

The space below is for optional use by issuing institutions for listing student’s expected annual budget.

www.collegeboard.org
1. YOUR NAME
   Mr. ____________________________________________
   Ms. ____________________________________________
   Mrs. ____________________________________________
   Miss ____________________________________________
   FAMILY (surname) ____________ GIVEN (first) ____________ MIDDLE ____________
   (Circle one)

2. PERMANENT ADDRESS
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

3. MAILING ADDRESS
   (If different from above)
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

4. DATE OF BIRTH
   MONTH ____________ DAY ____________ YEAR ____________

5. PLACE OF BIRTH (country)
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

6. COUNTRY OF CITIZENSHIP
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

8. Enter the expected amount of annual support from the sources listed below. Enter amounts in U.S. dollars. Please PRINT all entries. Use an additional sheet of paper for explanations, if necessary.

<table>
<thead>
<tr>
<th>STUDENT'S SOURCES OF FUNDS</th>
<th>ASSURED SUPPORT</th>
<th>PROJECTED SUPPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2014-15</td>
<td>2015-16</td>
</tr>
</tbody>
</table>

8a. PERSONAL OR FAMILY SAVINGS
   NAME OF BANK
   A bank official's signature is required on the certification if the student is partially or totally supported by personal savings.

8b. PARENTS
   Money available from sources other than savings.
   FATHER'S NAME
   MOTHER'S NAME
   Please describe the source:

8c. SPONSORS
   Money available from sources other than parents.
   SPONSOR'S NAME
   SPONSOR'S NAME
   Please describe the source:

8d. YOUR GOVERNMENT
   NAME OF AGENCY
   Enclose a signed copy of your letter of award with this form.

   TOTAL ➤ $ ____________ $ ____________ $ ____________ $ ____________

9. OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS
   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 and will be provided as indicated.

   SIGNATURE OF BANK OFFICIAL
   ____________________________________________________________
   TITLE ____________________________________________
   NAME OF BANK ____________________________________________
   ADDRESS OF BANK ____________________________________________
   DATE ____________

   Parent's signature is required (see certification statement above).

   SIGNATURE OF PARENT
   ____________________________________________________________
   NAME ____________________________________________
   ADDRESS ____________________________________________
   DATE ____________

   Sponsor's signature is required (see certification statement above).

   SIGNATURE OF SPONSOR
   ____________________________________________________________
   NAME ____________________________________________
   ADDRESS ____________________________________________
   RELATIONSHIP OF SPONSOR TO STUDENT ____________________________
   DATE ____________

10. What is the present exchange rate of your country's currency to the U.S. dollar (for example, 3,100 pesos = $1)? □ Yes   □ No If YES, describe restrictions.

11. Does your government currently impose restrictions on exchange and release of funds for study in the U.S.? □ Yes   □ No

12. Do you have a source for emergency funds once you arrive in the U.S.? □ Yes   □ No If YES, name source.

13. How will you pay for your transportation to the U.S.? __________________________

14. What is the total amount of money you expect to have when you arrive at this institution? . . . . U.S. $ ____________

15. Do you plan to remain in the U.S. during the summer? □ Yes   □ No

16. If remaining in the U.S., do you plan to attend summer school? □ Yes   □ No

17. What are the sources and amounts of support available to you during the summer? AMOUNT SOURCES:
   U.S. $ ____________
   U.S. $ ____________
   U.S. $ ____________
   U.S. $ ____________
   U.S. $ ____________

18. A CERTIFICATE OF ELIGIBILITY (Form I-20 or DS-2019) will not be authorized until this form is completed and returned to the institution to which you are applying. The institution will attach a copy of this form to your CERTIFICATE OF ELIGIBILITY. Both the form and certificate must be shown to the U.S. consol to obtain a visa.

I certify that the information on this form is true, correct and complete.

I understand that any misrepresentation may be cause for refusing or revoking admission.

SIGNATURE OF STUDENT ____________________________ DATE ____________

FOR OFFICE USE ONLY

SIGNATURE OF COLLEGE OFFICIAL ____________________________ TITLE ____________________________
NAME OF INSTITUTION ____________________________________________ ADDRESS ____________________________________________
DATE ____________