

Documentation Required

As part of the application for Admissions, The U.S. Citizenship and Immigration Services requires that, all F-1 (Certificate of Eligibility for Non-immigrant - Form I-20) and J-1 (Certificate of eligibility for Exchange Visitor Form DS-2019) applicants provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. college/university.

If the student will use their own personal funds as the main source of financial support, the student must provide their official bank statement showing available funds. However, if the student will be supported by a private sponsor (such as a family member, friend or private institution), the sponsor must sign the Statement of Financial Obligation below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student's duration of study at CSUSB. In either case, the sponsors must also provide an official bank statement showing available funds in liquid assets. Bank statements must be signed and/or seal by bank and not be more than 6 months old from date student applied to CSUSB.

If the student will be sponsored by a public agency (such as an embassy, home government, public institution or religious organization), the agency must provide official certification that the appropriate costs will be covered.

Student Information

Last Name: First Name: Middle Initial:

Permanent Foreign Address:

Estimated Student Budget for One (1) Academic 2 Semesters

Expenses	Undergraduate (24 Units)	Graduate (12 Units)	MPA (12 Units)	MBA/MSA/ MS IST/MSEI (12 Units)	Second Bachelor (24 Units)	Doctorate (12 Units)
Tuition & Fees	\$16,487	\$10,157	\$11,777	\$23,397	\$17,921	\$17,831
Living Expenses	\$12,142	\$12,142	\$12,142	\$12,142	\$12,142	\$12,142
Books & Supplies	\$1,272	\$1,272	\$1,272	\$1,272	\$1,272	\$1,272
Transportation	\$1,566	\$1,566	\$1,566	\$1,566	\$1,566	\$1,566
Health Insurance	\$922	\$922	\$922	\$922	\$922	\$922
Personal/Misc.	\$1,566	\$1,566	\$1,566	\$1,566	\$1,566	\$1,566
Total	\$33,955	\$27,625	\$29,245	\$40,865	\$35,389	\$35,299

*NOTE: All fees are subject to change without notice.

**Graduate Business Professional Fee: \$270/unit (MBA/MSA)/\$135 (MPA) included in above calculation.

Dependent Information

If your spouse or children will accompany you to the United States, you must provide proof of additional funding of **\$1,800** for a spouse and **\$1,200** per child per academic year (2 semesters) in order for their names to be listed on your I-20. We also request copies of marriage certificate and family registry. Please also include copies of your dependents passport and visa (if applicable). Below list your dependents accompanying you to the United States:

Last Name	First Name	Relation	Country of Birth	Country of Citizenship	Date of Birth (MM/DD/YYYY)

Personal Financial Support

You must finish verification for financial support for the entire academic year. Complete **any of the three** sections below that are applicable. Give all amounts in U.S. Dollars (USD). If there is more than one sponsor or bank in any category, you must attach all other letters, signatures and certificates (originals only).

Personal Support: My personal financial resources at this time are \$ USD.

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Private Support/Sponsor

I guarantee, without reservation, to support the educational costs and living expenses, including tuition fees, books and supplies, room and board, health insurance, medical or emergency expenses, travel and other miscellaneous expenses for (print name of student): while he/she is enrolled at California State University, San Bernardino. I also agree to furnish additional support for this student's dependents as listed previously on this form or any other that may later come to the United States. I further guarantee that the student will not become a public charge during his/her stay in the United States.

Sponsor's Name (Print): Date:

Sponsor's Signature:

Relationship to Applicant:

Address:

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Government, Foundation Agency or Corporate Fellow Support

Please submit this form to the agency providing your financial support for certification of the required information or instruct the agency to send a letter to the International Student Admissions Office as well as the Student Accounts Office at California State University, San Bernardino specifying the amount of the award, period of support, and any condition or terms that pertain.

Agency Name:

Address:

I certify that the agency named above will provide the applicant the equivalent of \$ USD per year for the duration of his/her studies.

(Continue next page)

Print Name of Agency Official: Date:

Signature of Agency Official: Title:

Address:

Certification by Applicant

The above information is complete and correct to the best of my knowledge.

Print Name:

Signature: Date: