

## Certification of Finances Form

### PERSONAL INFORMATION:

Your name: \_\_\_\_\_  
Family/Surname                      Given/First                      Middle

Permanent address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Date of Birth:      Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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

Number of children: \_\_\_\_\_ How many will accompany you to the USA? \_\_\_\_\_

How will you support your dependents if they accompany you to the USA?

\_\_\_\_\_

### FINANCIAL INFORMATION:

What is the present exchange rate of your country's currency to the US dollar? 1 US\$ = \_\_\_\_\_

Does your government impose any restrictions on exchange and release of funds for study in the USA?

(check one)      Yes      No

If yes, describe: \_\_\_\_\_

Do you have a source of emergency funds in the USA or another country? (check one)      Yes      No

If yes, name of source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

What is the total amount of money you expect to have when you arrive at the College of St. Catherine?

\$ \_\_\_\_\_

**A CERTIFICATE OF ELIGIBILITY (I-20) WILL NOT BE AUTHORIZED  
UNTIL PAGE 1 AND 2 OF THIS FORM ARE COMPLETED IN FULL  
AND RETURNED TO  
THE COLLEGE OF ST. CATHERINE.**

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**STUDENT SOURCES OF FUNDS**

<b>Source</b>	<b>Supporting Documentation Required</b>	<b>Assured Support 1<sup>st</sup> Year</b>	<b>Projected Support 2<sup>nd</sup> Year</b>	<b>Projected Support 3<sup>rd</sup> Year</b>	<b>Projected Support 4<sup>th</sup> Year</b>
Personal Savings:	Original letter from bank on official bank letterhead indicating available funds, or original bank statement no older than 6 months showing funds for student's expenses	\$	\$	\$	\$
Parents: (please print name of each) _____ _____	Original bank statement no older than 6 months showing funds for student's expenses	\$	\$	\$	\$
Loans: (print name of lending institution) _____	Original, official letter of certification from lending institution including amount of loan.	\$	\$	\$	\$
Sponsor #1: (please print name of sponsor) _____	Original letter of guarantee from sponsor with sponsor's original signature and original bank statement no older than 6 months showing funds for student's expenses	\$	\$	\$	\$
Sponsor #2: (print name of sponsor) _____	Original letter of guarantee from sponsor with sponsor's original signature and original bank statement no older than 6 months showing funds for student's expenses	\$	\$	\$	\$
Your government: _____	Original, official letter confirming amount and type of financial aid	\$	\$	\$	\$
Other: (print source of funds) _____	Original, official letter confirming amount and type of financial aid	\$	\$	\$	\$
	TOTALS	\$	\$	\$	\$

**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**

\_\_\_\_\_  
**Signature of Parent /Guardian** **Date**

\_\_\_\_\_  
**Signature of Sponsor #1** **Date**

\_\_\_\_\_  
**Signature of Sponsor #2** **Date**