



Certification of Finances Form

You are not required to submit this form if you are applying for the OTD, MAISCE, MHI or certain MAED programs (AM², Curriculum & Instruction, Technology Integration, STEM Education).

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 dependents: _____

(dependents are children and spouse)

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?

(select one) Yes No

If yes, describe: _____

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

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

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

\$ _____

A CERTIFICATE OF ELIGIBILITY WILL NOT BE AUTHORIZED
UNTIL PAGE 1 AND 2 OF THIS FORM ARE COMPLETED IN FULL
AND RETURNED TO ST. CATHERINE UNIVERSITY.

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STUDENT SOURCES OF FUNDS

Source	Supporting Documentation Required	Assured Support 1 st Year	Projected Support 2 nd Year	Projected Support 3 rd Year	Projected Support 4 th Year
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: (list name of each) _____ _____	Original bank statement no older than 6 months showing funds for student's expenses	\$	\$	\$	\$
Loans: (list name of lending institution) _____	Original, official letter of certification from lending institution including amount of loan.	\$	\$	\$	\$
Sponsor #1: (list 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: (list 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: (list 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 (if providing funds) Date

Signature of Sponsor #1 (if providing funds) Date

Signature of Sponsor #2 (if providing funds) Date