



**FINANCIAL STATEMENT FORM:
GRADUATE INTERNATIONAL APPLICANTS
Required for I-20 Processing**

Northeastern Illinois University assumes no financial responsibility for international students. **All international students are required to show proof that funds are guaranteed for the first year of study to obtain an I-20.** Please ensure that adequate funding will continue to be available from the same or equally reliable sources for subsequent years. The following figures indicate the minimum amount needed for one academic year (fall & spring terms, minimum full-time enrollment) and twelve months of living expenses. Estimated costs may be higher or lower than shown. An international student on an F-1 or J-1 visa cannot sponsor another international student.

EXPENSES FOR 12 MONTHS	AY 2020-2021
Health insurance - <u>Estimated</u>	\$ 1,200.00
Books & supplies - <u>Estimated</u>	\$ 900.00
Living expenses (room & board) - <u>Estimated</u>	\$ 11,821.00
Transportation expenses - <u>Estimated</u>	\$ 535.00
TOTAL	\$ 14,456.00
GRADUATE DEGREE PROGRAMS	
Tuition and Mandatory fees <small>Tuition and fees are subject to change without notice.</small>	\$ 17,033.00
TOTAL WITH ESTIMATED EXPENSES	\$ 31,489.00
GRADUATE PROGRAM IN THE COLLEGE OF BUSINESS	
Tuition and Mandatory Fees <small>Tuition and fees are subject to change without notice.</small>	\$ 18,591.00
TOTAL WITH ESTIMATED EXPENSES	\$ 33,047.00
Will you be accompanied by Dependents? YES <input type="checkbox"/> NO <input type="checkbox"/>	
<small>If you are adding dependents you will need to provide additional expenses per year. Dependents are not permitted to work in the U.S. These figures are subject to increase without notice. You will need to provide identification pages of their Passports, Relationship Status (Marriage Certificate, Children Birth Certificates) Indicate: country of birth, country of citizenship, email address and phone number.</small>	
If yes. Additional for Spouse: + \$ 7,200.00 +Health Insurance \$ 1,689.00 Total + \$ 8,889.00	
If Yes, Additional Per Child: + \$ 6,000.00 +Health Insurance \$ 642.00 Total + \$ 6,642.00	

I. **PERSONAL RESOURCES:** You or your sponsor(s) must: 1) complete the section below; and 2) attach a bank/financial institution letter on official letterhead, for each sponsor/financial institution, verifying that funds, stated in U.S. dollars, and totaling at least the minimum amount required for one year's support, as described above, are available to you (savings account, current money market account, current certificates of deposit) while you are pursuing a full-time course of study applicable to your degree program. The letter must bear the original signature, in ink, of a bank officer/official. For more acceptable financial documentations see page 2.

Sponsor Name: _____
 Sponsor Address: _____
 Sponsor Phone # _____
 Sponsor Email Address: _____
 Relationship to Student: _____
 I will provide financial support towards student's educational and living expenses for the full length of degree program at NEIU. I have attached an official bank letter/bank Statement.
 Sponsor's Signature: _____ Date: _____

II. **OTHER RESOURCES:** If you will be sponsored by a government agency or private grant or scholarship, the sponsor or official designee must complete the appropriate section below. Please attach the official contract or agreement when returning this form. **THE INFORMATION MUST INCLUDE THE EXACT OR MINIMUM AMOUNT OF U.S. DOLLARS WHICH WILL BE PROVIDED EACH YEAR AND THE LENGTH OF TIME THIS MONEY WILL BE AVAILABLE.**

Governmental Agency/Scholarship Name: _____
 Amount Award \$ _____ Duration of Award _____

Student Name:	_____	_____	_____
	Surname/Family Name	Given Name/First Name	Middle Name (s)
Term applying:	Fall _____	Spring _____	Summer _____
Applicant's Certification			
I certify that the financial information furnished is a complete and accurate statement of resources available for study in the United States. I understand that submission of inaccurate and/or fraudulent information can be considered sufficient cause for termination of my enrollment and revoking my I-20 at Northeastern.			
(Applicant's Signature)		(Date MM/DD/YYYY)	

REQUIRED DOCUMENTATION

ANY COMBINATION of funds is acceptable, as long as you can demonstrate the coverage for 12 months.

This financial statement and attached supporting document(s) cannot be dated more than six months prior to the date of receipt in the OIP. Scanned original copies will be received for application. **Legible Scanned PDF Copies are only acceptable.** Please make copies of all application documents, including your financial documents, for yourself.

<p><u>Bank letter/statement/ Loan Guidelines</u></p> <p>Sponsor can be: Self, Family, Friend.</p> <ul style="list-style-type: none"> • Personal Funds • Personal Loan 	<ul style="list-style-type: none"> • Must be dated within 6 months of application submission. • Name of account holder must be present • Official letter must be in English, or be certified by an English Translator. • Type of Account ONLY: Savings, Checking, Matured Certificate of Deposit, Money market Accounts • Must show currency and its USD equivalency • Must be issued by bank with official bank seal. • Official Bank Letter with Bank Seal, if no seal must be Notarized
<p>Sponsors from Family/Friends in the U.S. who are Permanent Residents or U.S. Citizens:</p>	<ul style="list-style-type: none"> • Copy of Affidavit of Support –I-134 is required, go to https://www.uscis.gov/i-134 . • Have your sponsor write a letter (typed) who is a U.S citizen or Resident indicating what they will be sponsoring you for, tuition and or living expenses, who the sponsor is in relationship to you, and the period of time they will support you, sponsor must sign the letter. • Must be dated within the last 6 months • This letter MUST be Notarized
<p>Living Expense Sponsors</p>	<ul style="list-style-type: none"> • If you have family who are not citizens, or permanent residents and will be sponsoring your housing & living expenses <ul style="list-style-type: none"> ○ Written Letter stating that they will fully sponsor you for the Living Expense and signed. ○ Letter Must be Notarized.
<p>Governmental Agency/Scholarship Sponsor:</p>	<ul style="list-style-type: none"> • Original letter from Governmental Agency or Scholarship Sponsor • Must be dated within the last 6 months • Must indicate award recipient • Must indicate period of time covered by the award • Must indicate institution, Northeastern Illinois University • Must indicate total amount of support given to during the time period. • Must indicate if the amount will be awarded to student or to the institution.
<p align="center"><u>LIFE INSURANCE POLICIES, RETIREMENT ACCOUNTS, EMPLOYER LETTERS, REAL ESTATE HOLDINGS, BUSINESS ACCOUNTS AND TAX RETURNS ARE NOT ACCEPTABLE.</u></p>	

Date _____
Office of International Programs
Northeastern Illinois University
5500 N. St. Louis Avenue
Chicago, IL 60625, USA

Dear Office of International Programs,

This is to certify that _____ maintains
Customer's name

A checking Account _____

A savings Account _____

As of _____, the balance on the account/s is

Date of Letter

= US \$ _____

Local currency

US Dollars

If you have any questions, I can be reached at _____ or _____.

Phone number

Email

Sincerely,

Signed and sealed by the Designated Bank Official

MUST HAVE BANK SEAL OR BE NOTORIZED