

SECTION TWO: ESTIMATED EXPENSES/SOURCES OF FUNDING

Estimated Annual Expenses for the 2024-2025 Academic Year:

Graduate

| | |
|-------------------------|----------------|
| Tuition & Fees | \$17,964 |
| Housing- Single | \$19,232 |
| Books & Supplies | \$1,020 |
| Personal Expenses | \$3,694 |
| Transportation | \$1,496 |
| <u>Health Insurance</u> | <u>\$1,800</u> |

Total: \$45,206

❖ If you have dependents (spouse and/or children) that will come with you, please complete Section FOUR.

Your financial support can come from your personal funds, sponsoring friend or family member funds, from government and/or institutional scholarships, or from a combination of these sources. Your financial resources must meet or exceed the estimated totals listed above. **Please complete each section that applies to your sources of funding:**

Personal Funds: _____ **USD**
(Amount in U.S. Dollars)

Please read and affirm:

I have sufficient funds available to pay all my necessary annual expenses in the amount indicated above this statement, and I am further able to pay for travel to and from my home country. I certify that the statements made on this form are true. Also, I understand that I shall not receive any need-based financial aid from Notre Dame de Namur University.

Signature: _____ Date: _____

Sponsor Funds: _____ **USD** (please use separate page for additional sponsors)
(Amount in U.S. Dollars)

Sponsor's Full Name: _____ Relationship: _____

Sponsor's Full Address: _____

Sponsor's Phone: _____ Sponsor's Email: _____

Please have sponsor read and affirm:

I hereby certify that I am willing and able to provide the amount indicated above this statement annually to meet all direct and related expenses incurred during his/her studies at Notre Dame de Namur University, should that person require access to these funds. I authorize the release of supporting financial documents, and I certify that the information contained within the supporting documents is accurate.

Signature: _____ Date: _____

Government/Institutional Scholarships: _____ **USD**
(Amount in U.S. Dollars)

Name of Sponsoring Institution: _____

Please provide a copy of your scholarship letter from the government agency or institution sponsoring your studies.

SECTION THREE: VISA INFORMATION

Please complete this section only if you are currently residing in the United States.

Current Visa Type: _____ Visa Expiration Date (mm/dd/yyyy): _____

If you have previously held or currently hold an I-20, please provide the following:

Institution issuing the I-20: _____

Your SEVIS ID Number: _____

Current I-20 Expiration/Program Completion Date: _____

SECTION FOUR: DEPENDENT INFORMATION

Dependent 1 Information

Name in Passport: _____
Family (Surname) Name First (Given) Name Middle Name

Date of Birth (Month/Day/Year): _____

Dependent Country of Birth: _____ Dependent Country of Citizenship: _____

Your Relationship to Dependent: _____

Dependent 2 Information

Name in Passport: _____
Family (Surname) Name First (Given) Name Middle Name

Date of Birth (Month/Day/Year): _____

Dependent Country of Birth: _____ Dependent Country of Citizenship: _____

Your Relationship to Dependent: _____

Please use separate page for additional dependents

SECTION FIVE: DOCUMENT CHECKLIST

Required documents to include with this form:

- Proof of Financial Support (for example, a bank verification of funds or government sponsorship letter)
- Copy of your passport identification page
- Copy of your dependents' passport identification page (if applicable)
- English proficiency test score report or English language school certificate (if not already submitted)

If you are currently enrolled at another institution within the United States and will be transferring to NDNU, please submit copies of the following documents:

- Current visa
- Most recent I-94 form
- Most recent I-20 issued to you at your previous institution
- Employment Authorization Card (if you are currently on OPT)

Do you have questions about this form? Please contact NDNU's Principal Designated School Official (PDSO) at iadmissions@ndnu.edu or (650) 508-3600.