

# FINANCIAL AFFIDAVIT OF SUPPORT

### $\bullet$ $\bullet$ $\bullet$ $\bullet$

### Part 1

Family Name (Last)		Given (First)		Middl	e	
, , , , , , , , , , , , , , , , , , , ,						
Gender: ☐ Male ☐ Female			Date of Birtl	h (mm/dd/yyyy)		
Country of Birth		Country of Citizenship _				
Do you expect to come to the U.S.:	□ Alone	☐ With Spouse	□ With Children			
Dependents (if applicable):						
Family (Last) Name	Given (First) Name	Date of Birth (mm/do	d/yyyy)	Country of Birth	Relationship	
Family (Last) Name	Given (First) Name	Date of Birth (mm/do	d/yyyy)	Country of Birth	Relationship	
If you are currently outside the U.S.,	what type of visa do you	wish to receive?	⊐ J-1			
If you are currently in the U.S., what	type of visa do you hold?	?				
Do you plan to:   Travel to apply	for a visa	a Change of Status within t	the US			
If you are currently in the U.S. on an	F-1 or J-1 visa, which sch	nool, college, university or in	nstitute issued you	ur I-20 or DS-2019?		
Name and address of institution						
Address where I-20 or DS-2019 form	should be sent:					
Send to this address until (date)		_Telephone			il	
THITION AND ECTIMATED LIVIN	C EVDENCES 2017 201	IO ACADEMIC VEAD				
TUITION AND ESTIMATED LIVIN	G EXPENSES ZUII—ZU	IS ACADEMIC YEAR				
UNDERGRADUATE PROGRAMS		TUITION ESTIMATED	GRADUATE PRO			TUITION ESTIMATED
Driehaus College of Business		\$38,410	College of Com			\$23,360
College of Communication		\$38,410	_	ral Arts and Social Science	es	\$21,920
College of Liberal Arts and Social S		\$38,410	College of Educ			\$20,160
College of Computing and Digital N	1edia (CDM)	\$38,410	College of Com	puting and Digital Media	(CDM)	\$26,560
College of Education		\$38,410	0	nce and Health		\$22,720
College of Science and Health		\$38,410	Kellstadt Gradu	uate School of Business		\$33,280
School of Music		\$39,610	Kellstadt Gradu	uate School of Business F	ull-time MBA	\$49,920
The Theatre School		\$39,610	School of Music	c —Graduate programs		\$20,040
The School for New Learning		\$21,600		-Certificate program	S	\$15,030
(Based upon full-time status = enrolled in three or four courses per quarter.)			The Theatre Sc	hool		\$35,120
(sa opss time states time		po. qou.com)	The School for	New Learning		\$20,160
			College of Law	(JD)		\$46,780
			College of Law	(IIM)		\$36.720

Living and health insurance expenses:

\$15,600 a year (10 months) for all programs other than College of Law \$18,720 a year (12 months) for the College of Law

College of Law (MJ)

\$5,000 for the first dependent, \$4,000 for each additional dependent

\$26,400

## Part 2

### **DECLARATION OF FINANCIAL SUPPORT**

SOURCE OF FUNDS	AMOUNT ASSURED 1ST YEAR	REQUIRED DOCUMENTATION			
Student's personal funds:	U.S. \$	□ Copy of bank statement			
Family support:	U.S. \$	□ Sponsor's certification and copy of bank statement  Name and relationship of family member(s):			
Other support:	U.S.\$	Sponsor's certification and copy of bank statement  Name and relationship of sponsor(s):			
DePaul University support:	U.S. \$	Copy of award letter  Type of award:			
Government/agency support:	U.S. \$	Copy of letter or document from government/agency  Name of organization:			
TOTAL SUPPORT	U.S. \$	This amount should add up to the tuition and estimated living expenses on page 1 of the Affidavit.			
CERTIFICATION OF AGREEMENT BY STUDENT  I understand that as a non-immigrant student, I am expected to engage in full-time study at DePaul University. I certify that I have arranged for financial support for the duration of my studies at DePaul and have truthfully stated the financial arrangements above. I understand that by law I cannot expect to work to support my studies and that I cannot expect to receive financial aid after my arrival.					
Student signature		Date			
CERTIFICATION OF AGREEMEN	T BY SPONSOR				
I certify that I,	, am able and wil	lling to provide financial support to			
for the total amount of U.S. \$ per year while she/he studies at DePaul University.					
Sponsor's signature		Date			
Sponsor's address		Tel			
		Fax			