

The purpose of the *Certification of Finances* is to help colleges and universities obtain complete and accurate information about the funds available to international applicants who want to study in the United States. Strict government regulations, rising education costs, and economic conditions have made verifying the financial resources of international applicants essential. Institutions do not have the option of deciding whether to verify the financial resources of their international applicants; financial verification must be made prior to institutional issuance of a Certificate of Eligibility (Form I-20 or DS-2019).

This form is designed to standardize financial information provided by applicants to colleges, universities, and U.S. consuls. By completing this form and returning it to the college or university requiring it, an applicant, if admitted, may obtain that college's authorization and issuance of a Certificate of Eligibility (Form I-20 or DS-2019). If parents and/or sponsors are unable to obtain a bank official's verification, it is recommended that institutions forward a copy of the International Student Financial Aid Application to the family for completion. The institution should attach a copy of this certification to the Certificate of Eligibility. U.S. consuls scrutinize the statements of financial resources given by nonimmigrant visa applicants. This certification will help such officials make their decisions and expedite visa issuance.

**Return directly to the college providing or requesting this statement.**

**The space below is for optional use by issuing institutions for listing student's expected annual budget.**

## 1. Your Name

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Miss

Family (surname)

Given (first)

Middle

## 4. Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month	Day	Year	

## 2. Permanent Address

  
  


## 5. Place of Birth (country)

## 6. Country of Citizenship

## 3. Mailing Address (if different from above)

  
  


## 7. Expected Visa Type

- |                              |  |
|------------------------------|--|
| <input type="checkbox"/> F-1 | <input type="checkbox"/> G-2                   |
| <input type="checkbox"/> F-2 | <input type="checkbox"/> G-3                   |
| <input type="checkbox"/> J-1 | <input type="checkbox"/> G-4                   |
| <input type="checkbox"/> J-2 | <input type="checkbox"/> H                     |
| <input type="checkbox"/> G-1 | <input type="checkbox"/> Other (specify) _____ |

2

- = \$1

- ☐ Yes      ☐ No

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- ☐ Yes      ☐ No

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- \$       .00

- ☐ Yes      ☐ No

- ☐ Yes      ☐ No

- Amount

[illegible]

- Signature of Student \_\_\_\_\_

Date     
Day Month Year

**FOR OFFICE USE ONLY**

SIGNATURE OF COLLEGE OFFICIAL \_\_\_\_\_ TITLE \_\_\_\_\_

NAME OF INSTITUTION \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_