



Office of International Affairs  
414 N. Meridian Street  
Newberg, Oregon 97132

## INTERNATIONAL STUDENT DECLARATION OF FINANCES

U.S. law requires that all international students must submit the declaration of finances and financial proof before an I-20 is issued.

### Bank Statement Documents

- Bank documents must represent a checking, savings, or time deposit account. Brokerage, stock or equity funds, real estate, and/or any non-liquid assets are not accepted.
- Account balance for sponsor must be shown in an amount equal to or greater than the cost of one year of attendance
- The funds represented on your bank statement are the cost of school expenses minus all scholarship awards.

### Student Information

Student's Passport Name: \_\_\_\_\_

First/Give Name

Middle Name

Last/Family Name

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

MM/DD/YYYY

City/Country

Home Country Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

*Note.* If you are bringing a spouse or dependent with you, please attach a passport copy and explain their relationship to you.

### Funding

<i>Estimated Costs</i>	
Tuition for 25-26	\$38,743
Housing Estimate	\$14,000
Standard Fees	\$500
Health Insurance	\$4,532
Total estimated cost	\$57,775

Please check ALL source(s) of funding you will use for your educational program costs.

Student's Personal Funds \_\_\_\_\_ Government/Agency Funds \_\_\_\_\_

Family or Sponsor Funds \_\_\_\_\_ Scholarships from George Fox University \_\_\_\_\_

Other: \_\_\_\_\_

*This part needs to be completed by the sponsor of the applicant or the applicant if the applicant is his/her own sponsor, the applicant must complete this section and sign below.*

Sponsor's Name: \_\_\_\_\_



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First/Given Name      Middle Name      Family Name

Mailing Address: \_\_\_\_\_

Street and Number

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

I certify that I am willing and able to provide the amount of \$\_\_\_\_\_ (US dollars) per year for the education-related expenses of \_\_\_\_\_ (student's name) while during the course of his/her attendance at George Fox University.

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_  
First/Given Name      Family Name      MM/DD/YYYY

I certify that all statements on this form are true and accurate and that the stated funds are available for my educational expenses at George Fox University. I will notify George Fox University of any changes in my financial situation.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_  
First/Given Name      Family Name      MM/DD/YYYY