

Office of International Affairs 414 N. Meridian Street Newberg, Oregon 97132 fordk@georgefox.edu

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:			
Fir	st/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:	
Funding	_	ou, please attach a pa	ssport copy and explain their relationship to you.
Estimated Costs (Undergradue			
Tuition	\$42,03		
Room and Board	\$14,06	0	
Standard Fees	\$720		
Health Issuance	\$3,435		
Total estimated cost	\$60,24		
Minimum IS Scholarship Award	(\$18,00	,	
Total Estimated Cost	\$42,24	·5	
Please check ALL source(s) of fun			
Student's Personal Funds			
Family or Sponsor Funds Other:		• `	ge Fox University



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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: _					
_	First/Given Name	Middle Name	Family Name		
Mailing Address:					
5	Street and Num	ber			
City:	State/Province:_	Zip/	Postal Code:	Country:	
Telephone Number	er:	Ema	nil Address:		
Relationship to Ap	oplicant:				
I certify that I am w	rilling and able to بر	provide the amo	unt of \$	(US dollars) per year for th	ıe
education-related ϵ	expenses of		(studer	t's name) while during the course	e of
his/her attendance	at George Fox Uni	versity.			
Signature of Sponsor:First/Given Name Family		Eamily Name	Date:		
	riist/ Given Name	railing Name	WIWI/DI	7/1111	
I certify that all stat	tements on this for	m are true and a	accurate and that t	he stated funds are available for n	ny
educational expens	ses at George Fox U	niversity. I will	notify George Fox I	Jniversity of any changes in my	
financial situation.					
Signature of Studen	nt:		Date:		
Signature of Studer	First/Given Name	Family Name	MM/	DD/YYYY	