

FINANCIAL AFFIDAVIT FOR INTERNATIONAL STUDENTS

An international applicant accepted for admission to a graduate program at Pace University who requires a Certificate of Eligibility for a student visa **must** submit the International Applicant Financial Affidavit below. The completed affidavit must be submitted with a letter from a bank indicating the availability of sufficient funds in U.S. dollars available for one year of study. Applicants are advised to obtain two sets of bank documentation in order to have one set for the embassy use.

If any financial support is to be provided by one or more sponsors, the Sponsor(s) Affidavit(s) of Support must also be submitted and the sponsor(s) must provide the required bank documentation.

(Note: The Sponsor Affidavit of Support which follows this page may be reproduced.)

I certify that I hav	eU.S. dollars available to me for the fol	lowi	ng expenses of m	ny graduate education at Pace University.
provided on this cancellation of m for each term, the	the source of my financial support below and have attached origatifidavit is correct and complete. I know that giving false inform y admission to Pace University. I also understand that the entire at the insurance cost is an annual fee, and that costs may rise in coursework, additional costs will ensue. COLLEGE OF HEALTH P	ation tuit suc	n on this affidavir ion and general i ceeding terms. I	t or in support documentation may result in the institution fee is due at the time of registration also understand that if I am required to enroll for
	PHYSICIAN ASSISTAN			
	2012-2013 TOTAL ESTIMATED EXPENSES FO			SPRING TERMS*
				Source of Support
			5. Dollars	(self or sponsor**)
	Tuition and Fees (18 credits)	\$	20,062.00	
	Living Expenses (room and board)	\$	14,268.00	
	Health Insurance	\$	750.00	
	Other (books, personal expenses, and transportation)	\$	2,780.00	
	Total:	\$	37,860.00	
	ESTIMATED EXPENSES FOR THE OPTIONAL S	JMI	MER I AND SI	JMMER II TERMS*
			.S. Dollars	Source of Support (self or sponsor**)
	Tuition and fees (6 credits)	\$	6,426.00	(sett of spotisor)
	Living Expenses (room and board)	\$	6,563.00	
	Other (books, personal expenses, and transportation)	\$	651.00	
	Total:	<u>+</u> \$	13,640.00	
	Grand Total (12 Months):	\$	51,500.00	
Signature	Month Day Yea	r	Print Name	
Print Address				
Telephone	Fax		E-mail	

^{*} Subject to change

^{**}Each sponsor must complete an affidavit of support (see reverse side) and submit official bank documentation verifying availability of funds.



COLLEGE OF HEALTH PROFESSIONS PHYSICIAN ASSISTANT PROGRAM SPONSOR AFFIDAVIT OF SUPPORT

TO BE COMPLETED BY SPONSOR 1

I certify that I am willing and able t	o sponsor							
					(insert student name)			
	(insert amount)		U.S. dollars for her/his graduate tuition and living expenses while attending tementation in U.S. dollars dated and signed by a bank official no more than s					
	_				account funds sufficient to sponsor the student.			
Signature		Month	Day	Year	Relationship to Student			
Print Name		Sponsor Citizenship						
Print Address					Telephone Number			
Fax Number	E-mail							
TO DE COMPLETED BY CRONG		OR AFI	FIDAV	IT OF S	SUPPORT			
TO BE COMPLETED BY SPONS								
I certify that I am willing and able to	o sponsor				(insert student name)			
with the minimum amount of		115 4	lollars fo	r hor/hic	graduate tuition and living expenses while attending			
with the illillillillillil allount of	(insert amount)	v.s. u	ollars to	i ilei/ilis	graduate tuition and living expenses white attending			
Pace University. I have attached o	riginal bank do	cumentati	on in U.S	S. dollars	dated and signed by a bank official no more than si			
months before the student's enro	llment at Pace L	Jniversity i	indicatin	ig savings	account funds sufficient to sponsor the student.			
		/		/				
Signature		Month	Day	Year	Relationship to Student			
Print Name		Sponsor Citizenship						
Print Address		Telephone Number						
Fax Number	E-mail							
	SPONS	OR AF	FIDAV	IT OF	SUPPORT			
TO BE COMPLETED BY SPONS	OR 3							
I certify that I am willing and able t								
receiting that rain witting and able t	.о эропзот				(insert student name)			
with the minimum amount of	(insert amount)	U.S. dollars for her/his graduate tuition and living expenses while attending						
Pace University Thave attached o		cumentati	on in IL	S dollars	dated and signed by a bank official no more than si			
· · · · · · · · · · · · · · · · · · ·	-				account funds sufficient to sponsor the student.			
Signature		Month /	Day	_/Year	Relationship to Student			
Print Name			Sponsor Citizenship					
Print Address		Telephone Number						
Fax Number	E-mail							