

## International Student Financial Affidavit of Support

**Instructions:** (1) Please read the instructions carefully to properly complete this International Student Financial Affidavit of Support form. (2) **Submit copy of unexpired passport with this form.** Incomplete information or missing supporting documents will delay the processing of your I-20. Previous versions of this form are not accepted.

### SECTION A: STUDENT INFORMATION

1. Term applying for:     Fall semester                       Spring semester                      Year: \_\_\_\_\_  
(Please check only one box)

2. Full legal name as listed in your passport: **(A copy of your passport is required together with this form)**

\_\_\_\_\_ (Last name / surname/ family name)                      \_\_\_\_\_ (First and middle name)

3. Email address: \_\_\_\_\_                      CWID: \_\_\_\_\_

4. Date of birth: \_\_\_\_\_ (month/day/year)                      Gender:  Male                       Female

5. Country of birth: \_\_\_\_\_                      Country of citizenship: \_\_\_\_\_

6. Foreign address **(Required from all students)**  
 Do you want your I-20 mailed here?  Yes     No

\_\_\_\_\_  
Line 1

\_\_\_\_\_  
Line 2

\_\_\_\_\_  
City

\_\_\_\_\_  
Postal code                      \_\_\_\_\_  
Country

7. U.S. address – No P.O. Box allowed *(If applicable)*  
 Do you want your I-20 mailed here?  Yes\*     No

\_\_\_\_\_  
Line 1

\_\_\_\_\_  
Line 2

\_\_\_\_\_  
City                      \_\_\_\_\_  
State                      \_\_\_\_\_  
Zip code

\_\_\_\_\_  
Phone number

**\*Note:** I-20 will not be mailed to you if you are currently in the U.S. AND you are not traveling outside the U.S. Contact [ieei20@fullerton.edu](mailto:ieei20@fullerton.edu) if you are traveling outside the U.S. before the semester begins.

### SECTION B: DEPENDENT INFORMATION (if applicable)

Please provide financial verification for additional \$5,000 per dependent.

- |    |   |   |                                 |                                       |
|----|---|---|---------------------------------|---------------------------------------|
| 1. | _____   | _____   | _____                           | _____                                 |
|    | <small>Last name, First name</small>          | <small>Relationship to student (husband, wife, son, daughter)</small> | <small>Country of Birth</small> | <small>Country of Citizenship</small> |
|    | <small>Date of birth (month/day/year)</small> |   |                                 |                                       |
| 2. | _____   | _____   | _____                           | _____                                 |
|    | <small>Last name, First name</small>          | <small>Relationship to student (husband, wife, son, daughter)</small> | <small>Country of Birth</small> | <small>Country of Citizenship</small> |
|    | <small>Date of birth (month/day/year)</small> |   |                                 |                                       |
| 3. | _____   | _____   | _____                           | _____                                 |
|    | <small>Last name, First name</small>          | <small>Relationship to student (husband, wife, son, daughter)</small> | <small>Country of Birth</small> | <small>Country of Citizenship</small> |
|    | <small>Date of birth (month/day/year)</small> |   |                                 |                                       |

### SECTION C: TRANSFER STUDENTS ONLY - Complete this section if you have attended another school in the U.S. within the last 6 months OR are currently in the U.S. Please submit the following:

- ✓ Copy of your valid passport (required from all students).
- ✓ Copy of your current visa.
- ✓ Copy of your I-94 form (front and back).
- ✓ Copy of your current I-20 form.
- ✓ Submit the Transfer In to Cal State Fullerton form to your previous school. Forms are located at [www.fullerton.edu/forms/](http://www.fullerton.edu/forms/)

1. Previous SEVIS ID#: \_\_\_\_\_ 2. Name of previous school in the US: \_\_\_\_\_

3. Date of last attendance or date you will complete your final term in previous school: \_\_\_\_\_

**SECTION D: SPONSOR INFORMATION**

\_\_\_\_\_ residing at \_\_\_\_\_  
Name of sponsor Street and number

\_\_\_\_\_ certify that I will assume full financial responsibility, including educational and living expenses for the above named student while he or she is enrolled at Cal State Fullerton.  
City State Postal or Zip code Country

\_\_\_\_\_  
Signature of sponsor Relationship of sponsor to student Date (month/day/year)

**SECTION E: FINANCIAL INFORMATION** (Please provide proof of financial support)

A. Attach the sponsor's financial document(s). The bank statement and/or letter **must be dated within the last year** and clearly show:

1. Name and address of the bank institution **with** the name of the account holder.
2. Current available balance in **U.S. dollars**.  
**Acceptable Financial Evidence:** Financial documents may include the following:
  - ❖ Saving or Checking account
  - ❖ Certificate or Time Deposits with the maturity date in the future
    - Most recent monthly bank statement(s) must be dated within one year.
    - Foreign bank statement and/or letter with English translation and showing amount in **U.S. dollars**.
  - ❖ Letter of Financial Support or Financial Guarantee document from Government Sponsors or Foreign Embassies which specify California State University as student's school, and validity period of financial support.
  - ❖ Official scholarship Award letter from sponsor for student receiving Scholarships.

B. **OR** Have a **bank official** fill out the Bank Certification section below.

Your financial document must show at least this amount	Undergraduate <small>based on 12 units per semester</small>	*Business Graduate <sup>1</sup>	*Full-Time MBA	*Non-Business Graduate	*Credential	*Doctorate
<b>Tuition and fees (Two semesters)</b>	\$15,554	\$19,712	\$31,108	\$14,708	\$14,282	17,726
<b>Living expense (Includes Med. Insurance)</b>	\$17,219	\$17,219	\$17,219	\$17,219	\$17,219	\$17,219
<b>Total</b>	<b>\$32,773</b>	<b>\$36,931</b>	<b>\$48,327</b>	<b>\$31,927</b>	<b>\$31,501</b>	<b>\$34,945</b>

<sup>1</sup> Business Graduate includes: MBA, Masters in accounting, Business Administration, Health Care Management, Business & Technology, Information System, and Taxation.  
<sup>2</sup> Total includes Graduate Business Professional (GBP) Fees of \$5,004.  
 \*Based on 9 units per semester.

**Bank Certification** (This section must be completed by a bank official)

Name of depositor: \_\_\_\_\_ Relationship of depositor to student: \_\_\_\_\_

Account type:  Checking  Savings  Other \_\_\_\_\_ Date opened: \_\_\_\_\_  
(month/ day/year)

Current balance: \$ \_\_\_\_\_ in U.S. Dollars Today's date \_\_\_\_\_  
(month/day/year)

Bank name: \_\_\_\_\_

Bank address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of Bank official: \_\_\_\_\_

Signature of bank official: \_\_\_\_\_

**Bank seal or stamp  
(required)**

**SECTION E: STUDENT'S SIGNATURE**

I certify that all information given above is true and correct.

Student's signature \_\_\_\_\_

Date: \_\_\_\_\_  
(month/day/year)