

# FINANCIAL AFFIDAVIT FOR GRADUATE INTERNATIONAL STUDENT APPLICATION

College of Graduate Studies and Research  
115 Alumni Foundation Center  
Mankato, MN 56001 USA  
507-389-2321 (V), 800-627-2321 or 711 (MRS/TTY)

**IMPORTANT: RETURN THIS WITH YOUR APPLICATION FOR ADMISSION. FAILURE TO RESPOND TO ALL QUESTIONS, REQUIREMENTS, AND BLANKS WILL DELAY THE PROCESS OF ADMISSION.**

- Admission may be denied if student indicates insufficient amount of support to cover cost.
- The ESTIMATED cost of attending Minnesota State Mankato for a school year is approximately \$15,455. MBA applicants must demonstrate the availability of at least \$18,900. Verification of an additional \$6,500 is needed if you are bringing a spouse/first dependent and \$4,000 for each additional dependent.
- U.S. Homeland Security/Immigration requires that admission decisions be based on academic acceptance and evidence of adequate funds to meet college expenses for the first year and for the entire period you plan to study in the United States.
- The lack of adequate financial resources, as stated above, will jeopardize your status as a student in the U.S.

*Shaded areas must be signed and all appropriate sections must be completed or the form will be returned to the student for completion.*

Applicant's Name: \_\_\_\_\_  
(As it appears on Passport) (Last or Family Name) (First or Given Name) (Middle Name)

PLEASE INDICATE THE SOURCES OF FINANCIAL SUPPORT AND AMOUNT YOU ANTICIPATE RECEIVING IN U.S. DOLLARS.  
ALL SUPPORTING FINANCIAL DOCUMENTS MUST BE DATED WITHIN THE PREVIOUS THREE MONTHS.

- Personal (student) Resources: U.S. \$ \_\_\_\_\_  
(Original Bank Statements must be enclosed to verify amounts.)
- Parents or Sponsor Resources U.S. \$ \_\_\_\_\_  
(Official Certification Form and Original Bank Statement must be enclosed.)  
PARENT OR SPONSOR MUST SIGN ON SIDE 2 OF THIS FORM.
- Government Scholarship: U.S. \$ \_\_\_\_\_  
(A signed copy of your letter of award must be enclosed.)
- Other Sources: U.S. \$ \_\_\_\_\_  
(Please specify and provide signed affidavits from authorized persons or agencies.)  
\_\_\_\_\_  
U.S. \$ \_\_\_\_\_  
\_\_\_\_\_  
U.S. \$ \_\_\_\_\_

\*TOTAL U.S. \$ \_\_\_\_\_  
(required)

**OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS  
FROM PARENT OR SPONSOR**

**PARENT OR SPONSOR:** Please fill out information below.

**IMPORTANT:** Sponsor name(s) listed here must be **EXACTLY** the same as the **BANK ACCOUNT NAMES**.

*I certify with my signature that I have read the information furnished by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.*

\_\_\_\_\_ (Name of parent, relative, sponsor) \_\_\_\_\_ (Sponsor's relationship to student)

\_\_\_\_\_ (Street and Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State/County) \_\_\_\_\_ (Zip)

Are you sponsoring any other student currently studying in the U.S.?  yes  no

If Yes, student's name (please print) \_\_\_\_\_

School student is attending: \_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE OF PARENT, RELATIVE OR SPONSOR) \_\_\_\_\_ (DATE)

**OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS**

**APPLICANT:** Please provide the **REQUIRED** signature and date below.

By signing here you are agreeing to the following statement.

*I certify that the information provided is correct and complete and that I shall notify Minnesota State University, Mankato of any change in my financial circumstances. I understand that inaccurate information can be cause for terminating enrollment at Minnesota State University, Mankato.*

\_\_\_\_\_  
(SIGNATURE OF PARENT, RELATIVE OR SPONSOR) \_\_\_\_\_ (DATE)

**IF APPLICABLE, LIST ANY DEPENDENTS (SPOUSE OR CHILDREN) WHO WILL BE ACCOMPANYING YOU AND WHO SHOULD BE INCLUDED ON YOUR I-20:**

NAME (last name, first name) (as it appears on the passport)	Relationship to Applicant	Country of Citizenship	Country of Birth	Birth Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____