INTERNATIONAL STUDENT FINANCIAL CERTIFICATE 2013-2014 FOR THE MAC PROGRAM

If applying for a different year, please contact us for the appropriate financial certificate.

Return this form to: MAC ADMISSIONS, KENAN-FLAGLER BUSINESS SCHOOL UNC-CH, CAMPUS BOX 3490, MCCOLL BLDG, CHAPEL HILL, NC 27599-3490

PLEASE READ ALL INSTRUCTIONS CAREFULLY: As an international student applicant, you are required by United States federal regulations to certify that you have sufficient funds to pay for your expenses at The University of North Carolina at Chapel Hill for the entire length of your studies. This form must be completed by every international applicant seeking admission, including applicants who may receive teaching or research assistantships or other awards. The visa document will be issued only after this certificate has been received with the requested financial documentation and approved, and you have been offered admission. If available, attach to this financial certificate a copy of the personal information page of the passport you will use to enter the U.S. A current ESTIMATE of minimum expenses for the MAC academic year (May through May) follows. Please note, however, that annual North Carolina State-mandated tuition increases often occur just prior to registration.

Tuition and Fees (Non-State Resident) \$ 55,377
Required Health Insurance \$ 1,561
Books, Room, Board and Personal Expenses \$ 27,834
Total Estimated Expenses \$ 84,772

A student planning to bring family members will need an additional \$8,700 per year for the spouse and \$4,350 per year for each child. The U.S. Department of State will usually only accept the marriage certificate as proof of eligibility for a dependent visa for a spouse. Common law spouses, fiancés, and significant others who do not qualify for a dependent visa may apply for a B-2 visitor visa. For more information please email:

Amanda Mills@unc.edu.

In computing your expenses, you should bear in mind that students holding Student (F) or Exchange Visitor (J) visas will not be authorized to work off-campus except under extraordinary circumstances. Therefore, the applicant should not look to employment, either part-time during the academic year or full-time during the summer, as a significant means of support while at The University of North Carolina. In general, students are not permitted to work full-time during the academic year. Spouses of F-1 student visa holders are not permitted to work under any circumstances. The spouse of a J-1 Exchange Visitor is permitted to work only with prior approval from U.S. Citizenship and Immigration Services.

1. Name (as it appe	ars in your passp	ort):				
		FAMILY/SURNAME	FIRST/GIVEN NAME	MIDDLE NAME		
2. Date and Place of	of Birth: Month:	Day: Year:	City of Birth:	Country of Birth:		
3. Current Mailing	Address: Street Ad	dress:		District:		
City:		Province:	Postal Code:	Country:		
At this address un	itil: (date: month/da	y/year):	Email address:			
4. Address in Home	e Country (student	s who require a student visa m	ust enter a complete physical addres	s, no Post Office Box numbers accepted):		
Street Address:			District:	City:		
Province:		Postal Code:	Country	:		
				7. Country of legal permanent residence:		
				9.Visa status if you are NOW in the U.S.		
10. Are you requesti	ng a visa docume	nt from UNC? \square Yes \square No.	If no, please complete page one on	y and attach proof of your immigration status		
11. Are you currently	y in F-1 or J-1 stat	us? □ Yes □ No. If yes, what is	s the end date of your I-20/DS-2019	or EAD?		
12. Which country's	passport will you	use to travel into the US?				
				come later. I plan to bring the following		
dependents [spou	ise/child(ren)] with r	ne: (Fill in the information belo	w for each dependent that you will be	ring to UNC).		
If available, ATTACH	A COPY OF EACH I	DEPENDENT'S PASSPORT IDEN	TIFICATION PAGE. Dependents are d	efined as <u>spouses</u> and <u>children</u> .		
DEPENDENT'S FAMIL	LY/SURNAME	FIRST/GIVEN NAME	MIDDLE NAME	RELATIONSHIP TO STUDENT		
CITY OF BIRTH	COUNTRY O	F BIRTH DATE	OF BIRTH (MONTH/DAY/YEAR)	COUNTRY OF CITIZENSHIP		
DEPENDENT'S FAMIL	LY/SURNAME	FIRST/GIVEN NAME	MIDDLE NAME	RELATIONSHIP TO STUDENT		
CITY OF BIRTH	COUNTRY O	F BIRTH DATE	OF BIRTH (MONTH/DAY/YEAR)	COUNTRY OF CITIZENSHIP		

14. Check if applicable:
Additional dependents listed on separate sheet. (Attach sheet to the financial certificate.)

Applicant's Name______MAC Program 2013-2014

Financial Calculation Worksheet (To be completed by the student):

STEP ONE: Calculate any additional expenses you may have to your program (Check	all boxes that apply to your situation):
I. ☐ Spouse's living expenses: \$8700.00	\$
II. Children's living expenses: \$4350.00 X (number of children)	\$
III. Total Additional expenses: add lines I + II IV. TOTAL ESTIMATED EXPENSES: (Add line III + \$84,772)	\$ \$

STEP TWO: Enter the amount and source of the funds you expect to have available for your program. You may enter any combination of the sources below to cover the cost of your program.	Amount Available in US Dollars
Personal Funds Name of Bank: A current original bank certification in English that is signed and dated within the last six months by a bank official is required to be submitted with this financial certificate if the student is supported in part or totally by personal funds. Electronic bank statements will not be accepted. The bank certificate must demonstrate that the account holder has funds immediately available on deposit for a specific dollar amount.	
Parents or Other Personal Sponsors Print name of each parent/sponsor:	
A current original bank certification in English that is signed and dated within the last six months by a bank official is required to be submitted with this financial certificate if the student is supported in part or totally by parent, family or other personal sponsor funds. Electronic bank statements will not be accepted. The bank certificate must demonstrate the account holder has funds immediately available on deposit for a specific dollar amount. Parents or other personal sponsors providing funds for this student's program of study at UNC-CH must provide a separate signed and dated letter verifying the amount of funds that the sponsor is willing to provide to the student.	
Example of a sponsor's letter: I, (enter full name of sponsor), will support (enter name of student) my (enter relationship to student: son, daughter, friend, employee, etc.), in the amount of (enter total U.S. dollar amount of support available) during his/her Master of Accounting program of study at the University of North Carolina at Chapel Hill. I have provided documentation that these funds are available.	
(Print full name of sponsor, Signature of sponsor and Date)	
Your Government Print name of government agency: Attach original, official documentation in English of your award.	
Other (private scholarship, home university, employer, loan, etc.) Please specify: Enclose a signed affidavit with English translation from authorized person to certify accuracy. If you are using a loan, please indicate the amount requested on the application and include the loan approval.	
TOTAL ALL SOURCES OF SUPPORT FOR THE MAC PROGRAM. Total for the year should be equal to or greater than the cost estimate calculated in "STEP ONE: IV."	

*NOTE: Failure to provide financial documents that meet the criteria in the table above **will delay the receipt of your visa document**. If you have questions, please visit the website for International Student and Scholar Services (ISSS) at http://global.unc.edu/isss. There is a Frequently Asked Questions (FAQ) section http://oisss.unc.edu/students/newstudents/faq.html which may help you to complete this form.

STEP THREE: Obtain **2 original copies** of your financial documents. Send one set of originals with your financial certificate (photocopies and electronic versions of an original will not be accepted). Keep one set of originals to use during your <u>visa interview</u> at the U.S. Embassy or Consulate and for **entry to the U.S**. during Immigration inspection.

APPLICANT'S NAME:		MAC PROGRAM 2012-2013		
STEP FOUR: Please read and sign the following plede	ge.			
I, and any supporting documentation is true and ac my financial obligation to UNC-Chapel Hill, includi and all accompanying family members for the duruphold the rights and responsibilities as defined this form is considered a violation of this code. (ht	ing the requirement that I shall maintain the requiration of my studies. I understand that by signin under the University Honor Code and that provid	red health insur	rance for myself t I am bound to	
APPLICANT'S SIGNATURE:	DA ⁻	_ DATE:		
STEP FIVE: Please return this form to the MAC Program document to ISSS. The academic department will forward regarding the progress of your immigration document completed and forwarded the financial certificate to ISS expediting your immigration document, http://oisss.unc.edu/students/newstudents/faq.html . IS to emails delays our ability to process your immigration Thank you! We look forward to welcoming you to UNC!	ward it to ISSS after completing the remaining set, first check with the MAC Program Admissions SS. Before emailing ISSS regarding the status of please consult our Frequently ISS kindly requests that students limit their email adocuments.	ection. If you he office to verifyour immigration Asked Que	ave questions y if they have n document or estions at:	
PART R. THIS SECTION TO BE COMPLET	TED BY UNC-CHAPEL HILL MAC PROGRAM R	FDRESENTAT	IVF	
Will the applicant receive financial support from the I Does this award include tuition? Does this award include fees? Will health insurance be provided by UNC in addition.	MAC program or other UNC-CH source?	□ Yes □ Yes □ Yes □ Yes	□ No □ No □ No □ No □ No	
Please review the information provided by the applicand then complete the following:	cant in the financial calculations worksheet (Step	One and Step T	wo)	
i. Total expenses noted by applicant in "STEP ON	NE: IV"	\$.		
ii. Amount of MAC or UNC cash award/ stipend to	applicant excluding tuition, insurance, etc.	\$	_	
 iii. Value of tuition and fees (\$55,377) to be provided iv. Value of health insurance provided by UNC (est v. Amount available to applicant from other source vi. TOTAL SUPPORT FOR PROGRAM (add ii + it is a superior of the superio	timated at \$1,561) s (see PART A, STEP TWO)	\$ \$ \$ ch as the expens	es (B2,i).**	
 Date student is required to begin classes at UI Expected degree/program completion date for 	NC Chapel Hill:this student:			
REPRESENTATIVE'S NAME & TITLE	REPRESENTATIVE'S SIGNATURE		DATE	
EMAIL	CAMPUS BOX NUMBER	PHONE		