



English Language Institute - International Student Certificate of Finances

A complete and correct certificate is required in order for an I-20 to be created. The I-20 will be created after the student has been admitted to the College and the information listed below has been verified.

Name (as it appears on your passport):

Family (last/surname) _____ Given (first) _____ Middle _____

Address where your I-20 should be sent:

Street: _____ City: _____

State / Province: _____ Country: _____ Postal code: _____

Date of birth: Month _____ / Day _____ / Year _____ Place of birth (country): _____

Email address: _____ Country of citizenship: _____

Expected date of enrollment to ELL: _____

Expected time period of study at the ELI (check number of eight week sessions): 1 2 3 4

You are required to certify that you can meet the cost of the period of time you will study. Below you will find an estimation of expenses for an eight week session:

Estimated cost	2018-2019 Eight Week Session Expenses
\$2,509	Tuition
\$2,072	Housing
\$2,198	Meals, Transportation, and Living Expenses
\$285	Health Insurance (estimate- cost varies)
\$7,064	TOTAL

Note: The above charges are subject to change and exclude transportation expenses for round trip fare to the United States. Be sure to include travel costs in calculating total personal expenses.

FAMILY MEMBER INFORMATION

(If accompanying you to the U. S.)

Relationship	Name (Family/Surname, First, Middle)	Country of Birth	Country of Permanent Residence	Date of Birth	Gender

Note: For each family member, you must provide a copy of his/her passport. Additionally, you will need to show an additional \$6,150 in funding.

SOURCES OF FUNDS

<p>What is the present exchange rate of your country's currency to the U.S. Dollar? (For example: 3,100 pesos = \$1)? _____ = \$1</p>	<p>Does your government currently impose restrictions on exchange and release of funds for study in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, describe restrictions: _____</p>
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SOURCES OF FUNDS (CONTINUED)

Please provide support amounts in U.S. Dollars. Print all entries using an additional sheet of paper, if necessary.

Assured support

	←	←	←	←	→
	Session 1	Session 2	Session 3	Session 4	
Personal funds Name of bank: City and country of bank:	\$	\$	\$	\$	
Family funds Print name(s) below: Name of bank: City and country of bank: (A parent/sponsor signature is required below.)	\$	\$	\$	\$	
Your government funds Print agency name below: (Enclose signed copy of letter of award.)	\$	\$	\$	\$	
College of Charleston scholarship/grant (Must include scholarship offer letter from department/athletic team.)	\$	\$	\$	\$	
Other (please specify) Name of bank: City and country of bank:	\$	\$	\$	\$	
TOTAL (Each total should equal the estimated total academic year cost on Page 1.)	\$	\$	\$	\$	

OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS

<p>REQUIRED BANK STATEMENTS:</p> <ul style="list-style-type: none"> ▪ A bank statement must be submitted for each person (including yourself) whose funds will support your educational expenses. ▪ Bank statements must be in English. English translations must be signed and sealed by the appropriate bank or government official. ▪ Each bank statement submitted must include the following: <ul style="list-style-type: none"> -sponsor's name (translated name must be printed on the original document); -date (documents must be dated no more than 12 months prior to the date classes begin for the desired term of enrollment); -amount of available funds and the type of currency. 	<p>This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated. I certify that I, _____, am able and willing to provide financial support to, _____ for the total amount of U.S. \$_____ per year while she/he studies at the ELI program at the College of Charleston.</p> <p>_____ Parent/Sponsor's signature Date</p> <p>_____ Address</p> <p>_____ Phone number</p> <p>_____ Relationship to applicant</p>
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I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.

Applicant's signature: _____ Date: _____

FOR OFFICE USE ONLY	
This is to certify that I have reviewed the declaration and attached documents; I approve issuance of a Certificate of Eligibility.	
Signature of College Official: _____	Date: _____