

# FINANCIAL SUPPORT FORM

As an international student applicant, you are required by United States federal regulations to certify that you have guaranteed funds to cover all expected expenses at Missouri Western State University for your first academic year. Additionally, you should plan for at least the same amount and a small increase for subsequent years of study at Missouri Western State University.

**Complete and submit the following information.** Return this form *with a scanned copy of bank statement* to the Missouri Western State University, Office of Admissions. You may scan/e-mail the completed page to <a href="mailto:admission@missouriwestern.edu">admission@missouriwestern.edu</a> OR fax to 1-816-271-5833.

### **Applicant information**

1.	Legal Name: _					
	Family name/Surname			Given name		Middle/maidenname
2.	Date of birth:	Month	Da		Year	
3.	Application	Spring	2021 (January)	Fall	2020 (August)	
4.	Application typ	oe (select one):	Undergraduate	Graduate	Exchange/Non-Deg	ree
5.	Country of birt	h:Country of citizenship:				
6.	Have you ever	held F-1 status i	n the U.S.?	Yes	No	
	If yes, where and what is/was your last date of enrollment as an F-1 student?					
7.	Are you currer	ntly in the U.S.?	Yes	No		
	If yes, wh	ere and what is	your visa status?			
	Do you pl	an to travel outs	ide the U.S. before	school starts?	Yes	No
8.	Indicate expec	ted visa type wh	ile studying at Miss	ouri Western:		
	Sources of fina r EACH)	ncial support (ch	eck all that apply, i	ndicate approx	imate amounts, and	include proof of financial support
	Self-supportin	ng				Amount: \$
	Sponsored by another individual (name and relati		cionship)		Amount: \$	
	Name			Relationship		
	Sponsored by	government or	other organization			Amount: \$
	(A certified cop	y of the scholarshi	p letter should be inc	luded.)		
re	sponsible for a		penses for the leng		•	accurate and that I am ultimately ission or falsification may result in
Si	gnature of appli	cant:				Date:



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#### **Affidavit of Support** statement of understanding (sponsor must read carefully):

- 1. I will be responsible for aiding the student through financial difficulty or unforeseen hardship while at Missouri Western State University. I understand that should the student appeal to the university, the appeal will be referred to me for assistance.
- 2. I have made contingency plans such that the unexpected financial difficulties created by unfavorable exchange rates, increases in educational costs, or other business or economic conditions will not reduce or stop the flow of monies to the student.

Sponsor	affidavit	of support
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I have read and understand items 1 and for the first year is \$ year to the applicant.	2 of the Affidavit of Support statement. I certify that the total amount available and that an amount not less than this will be available for each subsequent		
I have included proof of the required fine	ncial support.		
Signature of sponsor:	Date:		

#### Financial Statement information and instructions:

International applicants who require an I-20 visa document MUST provide proof of financial support: (a) Financial Support Form and (b) Financial verification document showing minimum balance in the checking/savings bank account. Missouri Western will accept bank statements that are not in U.S. dollars. Your application will remain incomplete until BOTH documents are received.

All certified financial documentation and financial statement forms submitted must be **dated no more than six months prior to the desired admission date**. The name on the Sponsor Affidavit of Support must match the name of the account holder on the bank statement. The Office of Admissions reserves the right to request additional documentation.

#### Estimated costs of attendance for fall and spring semesters 2019-20

Program and credit hours enrolled for 9 months	Undergraduate/ Bachelor (12 credit)	Graduate/Master (9 credit)
Tuition and Fees*	\$13,400	\$13,700
Room and Meals**	9,300	11,000
Textbooks and Personal Expenses	2,200	2,200
Health Insurance	1,200	1,200
Orientation fee (one time)	80	80
Total for each academic year	\$26,180	\$28,180

If you wish to be accompanied by your family (children and/or spouse) during your studies, you must provide verification of additional funds before we can authorize any family member to accompany you. For each person accompanying you, you must show evidence of an additional \$5,000 of financial resources per year. You will be required to purchase health insurance for each dependent. Please indicate on a separate piece of paper the name(s), birthdate(s), place(s) of birth, and relationship to you for each dependent.

plan)

Cost not included: airfare, travel, bedding, social events, clothes, summer term tuition and/or living expenses, etc.

<sup>\*</sup> Subject to change by University official action

<sup>\*\*</sup> Costs based on Vaselakos Hall (Bachelor's) or Vartabedian Hall (Master's) and 21 meals per week (All Access meal