## THE GEORGE WASHINGTON UNIVERSITY WASHINGTON, DC

## Sample FC - Government Sponsor **Financial Certificate**

## for International Students

The George Washington University Office of Undergraduate Admissions Rice Hall, Suite 201 2121 Eye Street, NW Washington, D.C. 20052

Phone: (202) 994-6040 • Fax: (202) 994-0325 gwadm@gwu.edu

## Requiring Forms I-20 or DS-2019

This form is to be completed and submitted along with your other application materials. Your application will not be considered complete until this financial certificate is received.

PLEASE NOTE: Applicants requiring an I-20 or DS-2019 must also provide: (1) copy of biographical page of passport; (2) copy of expiration date of passport; and (3) copy of all U.S. visa stamps, if any. Please email documents to gwadm@gwu.edu.

| Name (please print)   | Smith         |                      |   | George  |  |
|---|---------------|----------------------|---|---|--|
| As spelled on your passport)  |               | Full Last/Family Nar | me  | Full First Name/Given Name                                | Full Middle Name   |
| Date of Birth   | July<br>Month | <b>22</b>            | 1999<br>Year  | _   |  |
| Country of Birth  | United A      | Arab Emirates        |   | Country of Citizenship                                    | United Arab Emirates   |
| Applying to which GW  | school        | Elliott School       | of International Affa   | airs  |  |
| What type of immigra  | ion docume    | nt are you reque     | sting from GW?  | I-20 (F-1 Status) DS-                                     | 2019 (J-1 Status)  |
| Are you currently living in the U.S.?                                       |               |                      | Are you presently in F-1 or J-1 Status?   |   | If you are in F-1 or J-1 status, do you intend to transfer your SEVIS record to GW?          |
| If yes, attach a copy of your I-94 record.)                                 |               |                      | Yes  No<br>(If yes, attach a copy of all pages of your<br>I-20 or DS-2019 and a copy of visa stamp<br>from passport.) |   | Yes No Question Required if currently in F-1 or J-1  |
|   | d. Please co  | mplete the chart of  | on page two of this   | form with these amounts in                                | nses. The following expense amounts are the mind. These are projected 2017-2018 costs;       |
|   | Tuition an    | d Fees*:             | \$ 53,  | 868   |  |
| Living Expenses:  |               |                      | \$ 13,  | 000   |  |
| Books and Supplies:   |               |                      | \$ 1,   | 325   |  |
|   | Personal E    | xpenses:             | \$ 1,   | 525   |  |
|   | Health Ins    | urance:              | \$ 2,   | 450   |  |
|   |               |                      | TOTAL \$ 72,  | 168 (2017-2018 estimated                                  | d expenses)  |
|   | * Fees incl   | lude a one-time o    | nly Matriculation Fe  | e of \$350  |  |
| Family Expenses: If you<br>and U.S. \$5,394/year fo                         |               | d and plan to brin   |   | N COVERING ADDITIONAL I<br>/or children, you must also co | EXPENSES ertify at least U.S. \$10,796/year for your spouse                                  |
| Summer Expenses will  | require app   | roximately U.S. \$   | 5,200 in addition to  | the above, plus any summer                                | tuition and fees.  |
|   |               | ampus to support     | themselves. There   | fore, you should not anticipa                             | ling Student (F) or Exchange Visitor (J) Visas<br>te employment, either part-time during the |
|   |               | he summer, as a r    |   | ,   |  |
| cannot be authorized t<br>academic year or full-ti                          | ime during ti |                      |   | DENTS WHO WILL ACCOME                                     | PANY YOU   |
| cannot be authorized t<br>academic year or full-ti<br>Please check where ap | propriate:    |                      |   | -   | PANY YOU   |
| cannot be authorized t<br>academic year or full-ti                          | propriate:    |                      |   | -   | PANY YOU   |

following information for each dependent: family name, given name, gender, relation, date of birth, country of citizenship, city and country

of birth, and country of legal permanent residence.

Please complete the chart below to demonstrate the amount of liquid funds you or your sponsor will be able to contribute to your tuition and living expenses. Upon admission to GW, you will be required to provide supporting financial documents of the listed funds written in English.

| Source of Funds  | YEAR1<br>(enter amount) |   |  |  |  |  |  |
|--|-------------------------|---|--|--|--|--|--|
| Self-Support Upon admission, you will be required to provide a bank statement documenting sufficient cash for all years of study. By checking this box and signing below, you certify that you have sufficient accessible funds for the duration of your program at GW.  | \$                      |   |  |  |  |  |  |
| Parents or Individual Sponsors Upon admission, you will be required to provide a bank statement with sponsor's name showing funds to cover at least 1 year of study. Sponsor must sign below.  | \$                      |   |  |  |  |  |  |
| Government Sponsorship or Scholarship Upon admission, you will be required to provide a signed copy of your letter of award, specifying the current date, the name of the George Washington University, the US dollar amount, the exact starting date and length of scholarship, and conditions of the award.  | \$ 72,168               | Amount of Sponsorship Required  |  |  |  |  |  |
| Other (Specify) Upon admission, you will be required to provide a signed affidavit from a person authorized to certify the accuracy of this entry.   | \$                      |   |  |  |  |  |  |
| TOTAL: Must equal or exceed GW estimate of expenses (\$72,168) for the first year of study.  | \$ 72,168               | (Required: If not automatically totaled, add all columns and include sum here.) |  |  |  |  |  |
|  | Total Re                | quired  |  |  |  |  |  |
| APPLICANT'S CERTIFICATION  |                         |   |  |  |  |  |  |
| I certify that I have read the information provided on this certification, that it is true and accurate  |                         |   |  |  |  |  |  |
| Signature of Applicant Signature Required Date 02/28/2017  |                         |   |  |  |  |  |  |
| GWid (if known) G 12345678   |                         |   |  |  |  |  |  |
| REQUIRED: OFFICIAL CERTIFICATION BY FAMILY OR INDIVIDUAL SPONSOR   |                         |   |  |  |  |  |  |
| Sponsor's Name (please print) Embassy of the United Arab Emirates Relationship to Applicant Sponsor  |                         |   |  |  |  |  |  |
| Sponsor's Address 2406 Massachusetts Avenue NW, Washington, DC 20008 Sponsor Information Required  |                         |   |  |  |  |  |  |
|  |                         |   |  |  |  |  |  |
|  | anent Resident          | Other   |  |  |  |  |  |
| please indicate:<br>Sponsors who are living in the U.S. and are not citizens must provide  | e copies of their imm   | nigration papers (I-94 and visa stamps), as well as a copy                      |  |  |  |  |  |
| of the biographical page of their passport and the passport expirati   | on date.                |   |  |  |  |  |  |
| I guarantee that I have sufficient, liquid funds for the student's first ye  | ear of study and that   | harring unforeseen circumstances. Lwill provide additional                      |  |  |  |  |  |
| adequate funding for the duration of the student's program.  |                         | nsor Signature and Date Required  |  |  |  |  |  |
| Sponsor's Signature A Chalanship   |                         | Date 02/28/2017   |  |  |  |  |  |
| This form will not be considered complete without the considered cons | original signature of   |   |  |  |  |  |  |