

FINANCIAL VERIFICATION FORM (FVF)

Please complete the following pages and submit to Gordon Zeto Center for Global Education office, via fax, mail, or scan to receive your Spelman College Certificate of Eligibility (I-20).

PLEASE PRINT OR TYPE YOUR ANSWERS

PERSONAL INFORMATION

TODAY'S DATE: _____ **STUDENT'S EMAIL ADDRESS:** _____
(Month/Day/Year)

STUDENT'S NAME

Last Name (Family)

First (Given)

Middle

MAILING ADDRESS:

Street

City State

Zip Code if in U.S.

Country

TELEPHONE: _____ **SCHOOL ID:** _____
(#issued by the school or your Social Security #)

Country of Birth: _____ Country of Citizenship: _____

Date of Birth: _____ Admissions Number: _____
Month/Day/Year (from your I-94 card accessible at www.i94.cpb.dhs.gov)*

ACADEMIC INFORMATION:

Program of Study (Major): _____

Semester you plan to begin your studies at Spelman College, please circle one: Fall or Spring _____

HOW DO YOU WISH TO RECEIVE YOUR SPELMAN I-20?

If you are **inside** the United States and have the F-1 status from another school _____
School Name

you do not need a Spelman I-20 **before** starting classes unless traveling outside of the United States.

___ Call the above number and I will visit the Gordon Zeto Center for Global Education to sign and pick up my I-20.

If you are **outside** the United States: *Please check one:*

___ Mail my Spelman I-20 to the address above.

___ Please call my contact person in U.S. and he/she will come to the Gordon Zeto Center for Global Education to pick up my Spelman I-20 and express mail it to me.

U.S. Contact Person's Name: _____ Phone #: _____

Address of Contact Person in U.S. _____

SECTION I: Tuition/Fees and Source of Support in U.S. Dollars Equivalent to \$48,074.00 (documentation required, see section III for details)

All applicants must show proof of finances. Parents or sponsors must also provide a letter of commitment and authenticated bank statements (an affidavit, section II & III).

Organizations (government or private) sponsoring you must provide a letter of sponsorship on official letterhead with the organization’s address, telephone and fax number, and the original signature and the title of the responsible official. This letter should also include your full name, the specific dollar amount, and duration of their sponsorship. Please note that documents submitted must equal the current cost of attendance, **\$48,074.00**

	2016-2017 *Estimated Program Costs (USD)
Tuition	\$23,626.00
Fee	\$3,688.00
New Student Fee	\$250.00
Room & Board	\$12,795.00*
Personal Expense	\$2,500.00
Transportation	\$1,800.00
Books & Supplies	\$2,000.00
Health Insurance (mandatory)	\$1,416.00
**TOTAL ESTIMATED COST	*\$48,075.00

* Additional Fees will be incurred for single rooms (\$381.50 per semester)
** This cost is only an estimate, additional fees may be incurred

SUMMER/WINTER BREAK HOUSING PLANS

Housing and food costs during winter and summer breaks are not included in the fees quoted above.

**Please list, in detail, your plans for Summer and Winter Breaks.
My sponsor will pay room and board for:**

IF YOU DO NOT HAVE THE FUNDS TO PAY FOR ROOM AND BOARD DURING BREAKS, YOU WILL NOT BE ALLOWED TO STAY ON CAMPUS.



Rokhaya Fall
 Gordon-Zeto Center for Global Education
 350 Spelman Lane SW Box 343
 Office 404-270-5681
 Fax 404-270-5539
 E-mail: rfall@Spelman.edu

SECTION II: AFFIDAVIT OF SUPPORT

(TO BE COMPLETED BY SPONSOR): You may photocopy this form for use by more than one sponsor.

By completing the notarized* affidavit, you are promising the United States government that you will provide this student with specific amount of money for every year she is going to study at Spelman College. With the attached documents, you are also attesting that you can afford the support you are promising.

This notarized* affidavit is being submitted on the behalf of: _____
 Full Name of Student

SPONSOR'S NAME: _____
 Last Name First

ADDRESS: _____
 Number and Street

 City/Town State/Province Zip Code if in U.S. Country

DECLARATION

I hereby certify that I am willing and able to provide, _____
 (full name of student)

With no less than \$ _____ each year for _____ years of
 (amount in U.S. dollars) (number of years)
 study at Spelman College. My (sponsor's) relationship to the student is _____.

DEPENDENTS: Will a spouse and/or child(ren) accompany you to Spelman College on your visa? Yes [] No []

If so you must add the following minimums to the total cost: **Spouse: add \$4,500, each child: add \$2,500.**
 (Do not list adult children or husbands who are supporting themselves. Also, do not include the student listed above).

The following persons are dependent upon me for support.

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Check all additional support: Amount of each type of Support
 ___ My own personal funds (attach certified copy of bank statement) USD \$ _____
 ___ College award (attach award letter) USD \$ _____
 ___ Other _____
 Please Specify _____ (attach supporting documents) USD \$ _____

SECTION III: STATEMENT OF FINANCIAL RESOURCES

ANNUAL INCOME.....\$USD_____

Attach a letter from your employer confirming your annual income. If self-employed, attach a certified copy of your last income tax return or report of commercial rating concern by a bank. The income of a company is not the owner's income and will not be accepted as proof of income. Submit an official statement of salary actually paid to the owner/sponsor.

SAVINGS DEPOSITS IN THE AMOUNT OF \$USD_____

Statement from an officer of the bank or other financial institution in which you have deposits, providing the following details: (1) date opened (2) the amount deposited for the past year and (3) present balance.

STOCKS & BONDS WITH A MARKET VALUE OF \$USD_____

Attach documented proof.

OWNER OF REAL ESTATE VALUED AT \$USD_____

With mortgages or other encumbrances amount to \$USD_____

Attach certified copy of deed.

Before signing, you must understand that you are making a financial commitment to the student. **Sponsors, who fail to provide the promised support, will force students to drop out of school. Sponsors should not expect the student to be able to help support the costs through employment. Employment is strictly controlled by the Immigration Service and is very limited.**

AFFIRMATION OR OATH

I hereby affirm that I understand the contents of this affidavit and that the statements are accurate.

Signature of Sponsor _____

Date: _____

Notarized by: _____

Date: _____