



To obtain a *Certificate of Eligibility* (I-20 or DS-2019), all international applicants must demonstrate their ability to pay all tuition, fees, and living expenses for at least the first year of study. Applicants should also demonstrate their ability to cover future expenses for the completion of their studies. Proof of funds typically includes bank statements, scholarship letters, or letters certifying employment. Documents older than one year from the time of the student's intended enrollment cannot be accepted.

INSTRUCTIONS

- Items 1–8: Answer all items completely.
- Items 9–10: List the following information:
- A. The source(s) of your funding
 - B. The total amount(s) of funding available in each category
 - C. The total funding available for the first year of study at the University and for the duration of studies at the University
- Item 11: Please read the statement carefully, then sign and date it.

Note: To facilitate the visa process, please provide a photocopy of your current passport (if available). Additionally, if you are currently in the United States, please forward photocopies of your current I-20 or DS-2019, U.S. visa, and I-94 card.

Return this form and supporting documentation to:
University of Rochester
Office of Admissions
300 Wilson Boulevard
Rochester, NY 14627-0251 USA
Fax: (585) 461-4595

Estimated Costs (2010 – 11 Academic Year)	Amounts (U.S. Dollars)
Tuition	\$ 40,140
Health Fee	\$ 660
Activities Fee	\$ 265
Health Insurance and Repatriation Fee	\$ 1,265
	Subtotal \$42,330
Room	\$ 7,155
Board	\$ 4,760
	Subtotal \$11,915
Books, Supplies, and Personal Expenses	\$ 2,745
	Grand Total \$56,990

Notes:

1. Undergraduate expenses do not include travel, freshman orientation fee, or transfer orientation fee.
2. Tuition, fees, and room and board expenses will increase in future years.
3. Freshmen and sophomores are required to live on campus (unless residing with a parent or legal guardian in the area) and to participate in a meal plan.
4. International students may owe taxes on money earned while in the United States.

UNIVERSITY OF ROCHESTER INTERNATIONAL FINANCIAL SUPPORT FORM

CONFIDENTIAL

1. LEGAL NAME* (Mr. Ms. Mrs. Miss) _____ * Please write your name exactly as it appears on your passport.					
FAMILY (Surname)		GIVEN (First)		MIDDLE	
2. TELEPHONE _____			3. FAX _____		
4. DATE OF BIRTH		5. PLACE OF BIRTH		6. COUNTRY OF CITIZENSHIP	
MONTH	DAY	YEAR			
7. COUNTRY OF RESIDENCE		8. Are you currently studying in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If yes, indicate HS/college from which you are transferring.</i>			
9a-9d. Enter the expected amount of annual support from the sources listed below. Enter amounts in U.S. dollars. Please PRINT all entries. Use an additional sheet of paper for explanations, if necessary.				10. OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS 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 for the purpose of full-time study at the University of Rochester.	
STUDENT'S SOURCES OF FUNDS	ASSURED SUPPORT	PROJECTED SUPPORT			
		FIRST YEAR	SECOND YEAR		THIRD YEAR
9a. PERSONAL OR FAMILY SAVINGS					
BANK NAME An official bank statement or a letter with an official's signature is required if the student is partially or totally supported by personal savings.					
9b. PARENTS Money available from sources other than savings.					
FATHER'S NAME MOTHER'S NAME Please describe the source:					
9c. PRIVATE SPONSORS/EMPLOYER Money available from sources other than parents.					
SPONSOR'S NAME SPONSOR'S NAME Enclose with this form a signed copy of your letter of sponsorship.					
9d. YOUR GOVERNMENT/SCHOLARSHIPS					
AGENCY NAME Enclose with this form a signed copy of your letter of award.					
TOTAL	\$	\$	\$	\$	
FOR OFFICE USE ONLY This is to certify that I have reviewed the declaration and attached documents, if appropriate, and approve issuance of a Certificate of Eligibility.				SIGNATURE OF BANK OFFICIAL TITLE NAME OF BANK ADDRESS DATE	
				Parent's or guardian's signature is required (see certification statement above). SIGNATURE OF PARENT OR GUARDIAN ADDRESS DATE	
				Sponsor's signature is required (see certification statement above). SIGNATURE OF SPONSOR ADDRESS RELATIONSHIP OF SPONSOR TO STUDENT DATE	
				11. A CERTIFICATE OF ELIGIBILITY (Form I-20 or DS-2019) will not be authorized until this form is completed and returned to the University of Rochester. The International Services Office will attach a copy of this form to your CERTIFICATE OF ELIGIBILITY. Both the form and certificate must be shown to the U.S. Consul to obtain a visa. 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.	
				SIGNATURE OF STUDENT DATE	

SIGNATURE OF COLLEGE OFFICIAL _____

TITLE _____

NAME OF INSTITUTION _____

ADDRESS DATE _____