



**International applicants are required to demonstrate they have the financial means (either through private funds or sponsorship) to attend the University of Rochester.** Applicants who are unable to meet the full cost of attendance without need-based aid from the University should NOT complete this form. These students must submit the CSS Profile: (<https://student.collegeboard.org/css-financial-aid-profile>).

**Applicants who are able to meet the full cost of attendance must submit this completed form along with their application for admission.** Your application will remain incomplete without a completed International Financial Support Form on file. Applications who can pledge the full, four year cost will, on average, increase their chances of admission.

**This form and supporting documents should be uploaded as PDFs through your MyROC account (enrollment.rochester.edu/myroc).** If you are unable to submit these documents via MyROC, you may email them to [international@ur.rochester.edu](mailto:international@ur.rochester.edu).

Estimated Costs (2017-18 Academic Year)	Amounts (U.S. Dollars)
Tuition and Fees	\$53,500
Health Insurance	\$2,300
Room and Board	\$15,700
Books and Supplies	\$1,310
Personal Expenses	\$1,080
Total	\$73,890*

\*Tuition, Fees, and room and board expenses will increase in future years.

Please complete form on Page 2 →



INTERNATIONAL FINANCIAL SUPPORT FORM

Legal Name\*: \_\_\_\_\_  
Last (Family) First (Given) Middle

\*For non-U.S. citizens: write your name exactly as it appears on your passport.

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Source of Funds:

Please include the sources of support for all years of undergraduate study. The total must be equal to or greater than the total shown on Page 1.

Enter all amounts in U.S. Dollars.

	Assured Support, First Year	Projected Support		
		Second Year	Third Year	Fourth Year
<b>Your savings</b> Name of bank: _____				
<b>Your parents or other family savings</b> Name: _____ Name: _____				
<b>Your government*</b> Type of award: _____				
<b>Private sponsor*</b> Type of award: _____				
<b>Other*</b> Specify: _____				
<b>TOTAL</b>				

\*Please provide a copy of your support letter

**I certify that I have read the information provided on this form and that it is true and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.**

Student Signature: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_