Please read prior to completing this form.

The purpose of the Certification of Finances is to help colleges and universities obtain complete and accurate information about the funds available to international applicants who want to study in the United States. Strict government regulations, rising educational costs, and economic conditions have made verification of financial resources of international applicants essential. Institutions do not have the option of deciding whether or not to verify the financial resources of their international applications; financial verification must be made prior to institutional issuance of Certificates of Eligibility (Form I-20 or IAP-66).

This form is designed to standardize financial information provided by applicants to colleges, universities, and United States consuls. By completing and returning this form to the college/university requiring it, an applicant, if admitted, may obtain that college’s authorization and issuance of Eligibility (Form I-20 or IAP-66). If parents and/or sponsors are unable to obtain a bank official’s verification, it is recommended that institutions forward a copy of the International Student Financial Aid Application to the family for completion. The institution should attach a copy of this Certification to the Certificate of Eligibility. United States consuls scrutinize the statements of financial resources given by nonimmigrant visa applicants. This Certification will help officials make their decisions and expedite visa issuance.

Return this form directly to the college that provided or requested it. Do not send it to the College Board.

The space below is for optional use by issuing institutions for listing student’s expected annual budget.
INTERNATIONAL STUDENT CERTIFICATION OF FINANCES 2022-2023

1. YOUR NAME
   Mr.   Ms.   Mrs.
   Miss
   FAMILY (Surname) GIVEN (First) MIDDLE

2. PERMANENT ADDRESS

3. MAILING ADDRESS
   (If different from above)

4. DATE OF BIRTH
   MONTH   DAY   YEAR

5. PLACE OF BIRTH (country)

6. COUNTRY OF CITIZENSHIP

8. 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.

<table>
<thead>
<tr>
<th>STUDENT’S SOURCES OF FUNDS</th>
<th>ASSURED SUPPORT</th>
<th>PROJECTED SUPPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2021-2022</td>
<td>2022-2023</td>
</tr>
<tr>
<td>8a. PERSONAL OR FAMILY SAVINGS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAME OF BANK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A bank official’s signature is required on the certification if the student is partially or totally supported by personal savings.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

|    |                  |                   |                   |                   |
| 8b. PARENTS                  |                  |                   |                   |                   |
| Money available from sources other than savings. |                  |                   |                   |                   |
| FATHER’S NAME                |                  |                   |                   |                   |
| MOTHER’S NAME                |                  |                   |                   |                   |
| Please describe the source:  |                  |                   |                   |                   |

| 8c. SPONSORS                 |                  |                   |                   |                   |
| Money available from sources other than parents. |                  |                   |                   |                   |
| SPONSOR’S NAME               |                  |                   |                   |                   |
| SPONSOR’S NAME               |                  |                   |                   |                   |
| Please describe the source:  |                  |                   |                   |                   |

| 8d. YOUR GOVERNMENT          |                  |                   |                   |                   |
| NAME OF AGENCY               |                  |                   |                   |                   |
| Enclose with this form a signed copy of your letter of award. |

TOTAL $ $ $ $ $ 

9. 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 as indicated.

   SIGNATURE OF BANK OFFICIAL:
   TITLE
   NAME OF BANK
   ADDRESS
   OF BANK
   DATE

   Parent’s signature is required (see certification statement above).

   SIGNATURE OF PARENT
   ADDRESS
   DATE

   Sponsor’s signature is required (see certification statement above).

   SIGNATURE OF SPONSOR
   ADDRESS
   RELATIONSHIP OF SPONSOR TO STUDENT
   DATE

10. How will you pay for your transportation to the U.S.? 

11. Does your government currently impose restrictions on exchange and release of funds for study in the U.S.? [ ] Yes [ ] No
   If YES, describe restrictions.

12. Do you have a source for emergency funds once you arrive in the U.S.? [ ] Yes [ ] No
   If YES, name source.
   Amount available in U.S. dollars $ $ $ $ $ 

13. What is the total amount of money you expect to have when you arrive at this institution? $ $ $ $ $ 

14. Do you plan to remain in the U.S. during the summer? [ ] Yes [ ] No

15. If remaining in the U.S., do you plan to attend summer school? [ ] Yes [ ] No

16. If you are a nonimmigrant student, do you have an authorization to work? [ ] Yes [ ] No

17. What are the sources and amounts of support available to you during the summer? AMOUNT SOURCES: U.S. $ $ $ $ $ 

18. A CERTIFICATE OF ELIGIBILITY (Form I-20 or IAP-66) will be authorized until this form is completed and returned to the institution to which you are applying. The institution 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

FOR OFFICE USE ONLY

Signature of College Official: Title:
Name of Institution: Date:

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2022SCF