



## Affidavit of Financial Support International Student Applicants

Please complete this form and return it with your other enrollment items.  
This completed form is required to create your Form I-20.

### Applicant Information

Name: \_\_\_\_\_  
Family Name
First Name
Middle Name

Date of Birth (month/day/year): \_\_\_\_\_ Marital Status:  Single  Married

### Estimated International Student Expenses for 2018-2019

Pre-Entrance Deposits (These are not included in your total amount, but must be paid before the Form I-20 is made.):

- International Student Deposit - **\$1,500 USD**
- Housing Deposit - **\$100 USD / \$500 USD for Married & Non-Traditional Housing**

EXPENSES	COST
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#### TRADITIONAL INTERNATIONAL YEARLY FEES AND EXPENSES

Tuition	\$14,880
General Fees	\$1,180
Room and Board	\$6,700
Health Insurance <small>*(estimated cost)</small>	\$1,900
Books & Supplies	\$1,000
Personal Expenses	\$1,035

#### NON-TRADITIONAL INTERNATIONAL YEARLY FEES AND EXPENSES

Tuition	\$14,880
General Fees	\$1,180
Housing (3 bedroom)	\$8,900
Health Insurance <small>*(estimated cost)</small>	\$1,900
Books & Supplies	\$1,000
Personal Expenses	\$4,300
Dependents	
Spouse:	\$2,000
Each child over age 13:	\$1,500
Each child under age 13:	\$750

**I certify that I will have a minimum of \$ \_\_\_\_\_ (calculate your total from the charts above) in U.S. currency for each academic year that I am studying at Johnson University.**

**Disclaimer: All costs are estimated and subject to change.**

## Student Finances

<i>These funds will be provided by:</i>	<i>Amount of funds (in US Dollars)</i>
Personal Funds (self-support): (Must include a signature below and bank statement)	\$ _____
Family Funds: (Must include a signature below and bank statement and letter of commitment from sponsor)	\$ _____
Johnson Institutional Aid: (Check with your financial aid counselor to view your institutional aid.)	\$ _____
Loan(s): (Must include a signed letter verifying the loan amount you will receive.)	\$ _____
Church or Sponsor: (If these funds come from a sponsor, include a signature below and a bank statement and letter. If these funds are from a church, include a signed award letter indicating the amount of the award.)	\$ _____
Total: (must equal calculated total on first page)	\$ _____

## Official Sponsor for Sources of Funding:

Official letters or statements from the bank must accompany this form for any individual who will be paying (including the student.) The bank statement and amount shown must be in English and in U.S. currency.

I certify that I have read the information provided, that it is a true and accurate statement, and the above funds will be provided as indicated. ***Accounts must be paid by August 15 for fall term, December 15 for spring term and April 15 for summer term.***

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relative's Signature (if funding): \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor's Signature (if funding): \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor's Signature (if funding): \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: All money must be sent in U.S. currency and be received before arriving on campus.**

**Consumer Information:** Johnson University does not discriminate on the basis of race, sex, color, national origin, age, handicap, or veteran status in provision of educational opportunities pursuant to the requirement of Title IX of the Education Amendments of 1972 and section 504 of the Rehabilitation Act of 1973.