

**Undergraduate F-1 International Student
Declaration of Financial Support**



Part 1: Student Information

Student Applicant Name: _____
First (Given) Name Last(Family/Surname) Name Middle Name (If Any)

Student ID: _____ E-Mail: _____

Date of Birth: _____ Country of Citizenship: _____

1st Year Cost of Attendance Breakdown

Expense	Per Academic Year (9 months, 2 semesters)
Tuition & Fees	\$34,816
Housing	\$6,476
Board (Meal Plan)	\$6,460
Health Insurance	\$1,500
Personal/Miscellaneous Expenses	\$1000
Total	\$50,252

Costs are subject to change, particularly from year to year, at the discretion of Bethany College.

I certify that the information on Part 2 of this form is true and accurate. I acknowledge that although I am documenting financial support for one academic year, I am personally responsible for my expenses for the duration of my studies at Bethany College, including breaks and any periods of practical training, paid or unpaid. I further acknowledge that opportunities for on-campus employment are very limited and competitive, and that working off-campus without academic authorization would constitute a violation of my F-1 status. I understand that I am required to abide by Bethany College policies and procedures, financial and otherwise, including meeting payment deadlines. I further understand that it is my responsibility to inform the College immediately if my financial circumstances change during my enrollment.

Applicant's Signature: _____ Date: _____

Part 2: Declaration of Financial Support

Source of Funds	Amount Assured for 1 st AND Subsequent Academic Years	Required Documentation
Student's Personal Funds	US\$	<input type="checkbox"/> Copy of bank statement
Family Support	US\$	<input type="checkbox"/> Sponsor's attestation and copy of bank statement <input type="checkbox"/> Sponsor name and relationship to student: _____ _____
Other Support	US\$	<input type="checkbox"/> Sponsor's attestation and copy of bank statement <input type="checkbox"/> Sponsor name and relationship to student: _____ _____
Agency/Government Support	US\$	<input type="checkbox"/> Copy of award letter or document from Agency/Government <input type="checkbox"/> Name of Agency/Government: _____ _____
College Support	US\$17,000	International Merit Scholarship
Total	US\$	Must show a total of non-college support of at least \$33,252

Individual Sponsor Attestation:

I attest that I, _____ am able and willing to provide financial support
Sponsor Name

to _____ in the amount of \$US _____ per
Student Name

year for the duration of his/her studies at Bethany College. I am providing financial documentation for the purpose of assurance that sufficient resources **are and will be available** to fund this student's expenses while studying at Bethany College.

Sponsor Signature: _____ Date: _____

Sponsor E-Mail Address: _____

Please note that due to the Family Educational Rights and Privacy Act Bethany College cannot release information in a student's record without the student's written consent.