

G LOBAL ENGAGEMENT OFFICE INTENSIVE ENGLISH LANGUAGE INSTITUTE

CERTIFICATION OF AVAILABLE FINANCES 2018-19: IELI

According to the U.S. Department of Homeland Security regulations, Creighton University is required to obtain certification that applicants have funds to cover expenses for their studies. To receive an I-20, you must complete this **Certification of Available Finances** and include the required documents. Please **print**.

PERSONAL INFORMATION

YOUR NAME:Family name			irst (given) name	/	DATE OF BIRTH:	OF BIRTH: / /			
			,			•			
			OF CITIZENSHIP:		EIVIAIL.				
HOME PHONE NUMBER:		MOBILE PHONE NUMBER:							
			ENROLLMENT IN IE	LI					
HOW MANY	SEMESTERS ARE YOU	PLANNING TO ENRO	DLL IN IELI?						
	RI	EQUIRED FINANCI	AL SUPPORT PROGR	RAM OF ENROLLM	ENT:				
		IELI semester	Bridge summer	IELI summer	Bridge summer	1			
	tuition & fees	\$5,380	\$11,828	\$5,380	\$11,135				
	health insurance	\$1,080	\$1,296	\$648	\$648				
	living expenses	\$5,518	\$5,518	\$3,000	\$3,000				
	other	\$2,700	\$2,700	\$1,300	\$1,300				
	TOTAL	\$14,678	\$21,342	\$10,328	\$16,083				
TUITION AN	D FEES include orientation	on, testing, classroom	instruction, cultural activit	ies, university and tecl	hnology fees.				
HEALTH INS	SURANCE is required of a	all students. Waivers a	vailable to government sp	oonsorships only.					
*LIVING EXP	PENSES include estimate	ed campus lodging and	meals. Off-campus lodgi	ng and meal costs ma	y be different.				
**OTHER exp	penses include estimated	d supplies and persona	I expenses.						
Cre			udents holding F-1 visas le expenses for any medi						
	ner Supplies and Perso ividual needs and prefere		enses are approximate.;	other classroom supp	olies and personal exper	nses depend or			
SPOUSE/DE	PENDENTS								
			as dependents, you must r child. For each depende			t for each			
Spouse	· :								
-	Full name as it appe	ears on passport	Date of birth	Place of L	oirth Country o	of citizenship			
Son/Da	ughter: e one	as it appears on pass	oort Date of birth	Place of I	birth Country o	of citizenship			
Son/Da			1 1						

Full name as it appears on passport

Circle one

Place of birth

Country of citizenship

CERTIFICATION OF APPLICANT'S SOURCES OF FUNDS

INSTRUCTIONS

fund	nds may come from personal finances, family or sponsors boods available in U.S. dollars or in other currency for your frency:						
Atta	ach one or more of the following original supporting financ	·	h translation) issue	d within the	past six	(6) mor	nths:
	 Official bank statement describing the account activity 	•					
	Official letter from the bank on letterhead indicating	·					
	 A letter of scholarship or sponsorship (Financial G award. Include the name, position and signature of the 			he amount, s	ource ar	id date o	f the
Plea	ase check your sources of funds and write the amount each	n source will provide in U.S. d	ollars:				
		ASSURED SUPPORT	•				
	PERSONAL FUNDS	\$	_				
	FAMILY/OTHER FUNDS	\$	_				
	SCHOLARSHIP or SPONSORSHIP	\$					
	TOTAL SUPPORT FROM ALL SOURCES	\$	_				
ΑF	FIDAVITS OF SUPPORT						
1.	PERSONAL FUNDS (If you are financially responsible "I have read the information in this Certification of Available Creighton. I certify that these funds are available (see doc	le Finances regarding the cos cuments provided by my bank	t of tuition and living and I accept full res	expenses for ponsibility for	my perion	od of stud xpenses	
	IMPORTANT: If you are showing personal financial re				_		
	Name of Applicant:	Signature:		Date:	/	_/	
2.	FAMILY or OTHER INDIVIDUALS (The relative or indiving sign the statement below and attach a bank statement		d who is[are] finan	cially respon	sible fo	r you mı	ust
	"I have read the information in this Certification of Available Creighton. I certify that these funds are available (see doc						
	Name of Person Financially Responsible:		Signature:				
	Relationship to the Applicant:			Date:	/	_/	
	Name of Person Financially Responsible:						
	Relationship to the Applicant:			Date:	/	_/	
3.	SCHOLARSHIP OR SPONSORSHIP						
	If you will receive a scholarship or will be sponsored by a camount, source, and dates of the award. The letter must be person authorizing the support, and addressed to Creig Registration.	e written on official letterhead	and must include the	e name, posit	ion and	signature	of the
	Name of Sponsoring Company, Agency, Foundation or G	overnment Agency:					

After completing Pages 1 and 2 of this form, return it with all supporting documentation to

DATE:____ /

I certify that the information on this form is correct and complete. I understand that any false information may be cause for denying or revoking admission.

SIGNATURE OF THE APPLICANT:_