CERTIFICATION OF AVAILABLE FINANCES 2006-07: 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 first (given) name middle name 

DATE OF BIRTH: ______ / ______ / ______

COUNTRY OF BIRTH: ___________________________ COUNTRY OF CITIZENSHIP: ___________________________

COUNTRY OF RESIDENCE: ___________________________ MAILING ADDRESS: ___________________________

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IELI COSTS for 2006-07

<table>
<thead>
<tr>
<th>SUMMER</th>
<th>SEMESTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and fees</td>
<td>Tuition and fees</td>
</tr>
<tr>
<td>$1,780</td>
<td>$3,450</td>
</tr>
<tr>
<td>Living expenses*</td>
<td>Living expenses*</td>
</tr>
<tr>
<td>1,680</td>
<td>3,920</td>
</tr>
<tr>
<td>Other** (books, insurance, personal exp.)</td>
<td>Other** (books, insurance, personal exp.)</td>
</tr>
<tr>
<td>1,040</td>
<td>1,830</td>
</tr>
<tr>
<td>TOTAL</td>
<td>TOTAL</td>
</tr>
<tr>
<td>$4,500</td>
<td>$9,200</td>
</tr>
</tbody>
</table>

Tuition and fees include orientation, testing, classroom instruction, language lab, cultural activities, field trips and certificate.

*Living expenses include campus lodging and meals.

**Other includes mandatory health insurance, books/supplies, and personal expenses. Please note that the amount included for books, supplies, and personal expenses are approximate, depending on individual needs and preference.

Note on Health Insurance: Creighton University requires that all students holding F-1 visas continuously enroll in its health insurance plan. Besides paying for the customary and reasonable expenses for any medically necessary covered medical expenses, the plan includes medical evacuation and repatriation of remains.

After completing this form (front and back), please return it with all supporting documentation to

Creighton University
Intensive English Language Institute
2500 California Plaza
Omaha, NE 68178
USA
CERTIFICATION OF APPLICANT’S SOURCES OF FUNDS

INSTRUCTIONS

Funds may come from personal finances, family or sponsors both in the U.S. and abroad. Funding may come from one source or a combination of sources. Documentation from you and/or your sponsor(s) must indicate funds available while you are in the U.S.

After completing this form (front and back), return it to the Intensive English Language Institute with the appropriate original supporting documents. Photocopies or faxes are not accepted. These are the required supporting documents:

- Bank statement describing the account activity: The date of issue must be within 3 months of the date we receive your application.
- Official letter from the bank verifying that the account owner has sufficient financial resources to cover the promised support during the applicant’s enrollment at Creighton University.
- A letter of sponsorship (if applicable) which lists the costs and expenses the sponsor will pay. The letter must be written on official letterhead and include the name, position and signature of the person authorizing the support.

Please check your sources of funds and the amount in U.S. dollars each will provide:

<table>
<thead>
<tr>
<th>SOURCE OF FUNDS</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSONAL FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>FAMILY FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>OTHER FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>SPONSOR'S FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>TOTAL SUPPORT FROM ALL SOURCES</td>
<td>$</td>
</tr>
</tbody>
</table>

AFFIDAVITS OF SUPPORT

1. PERSONAL FUNDS (If you are financially responsible for yourself, sign the statement below and attach a bank statement)

   "I have read the information in this Certification of Available Finances regarding the cost of tuition and living expenses for my period of study at Creighton’s Intensive English Language Institute. I certify that these funds are available (see documents provided by my bank) and I accept full responsibility for these expenses.

   Name of Applicant: ___________________________ Signature: ___________________________

   Date: _____________ / _____________ / _____________

2. FAMILY FUNDS (The relative who is financially responsible for you must sign the statement below and attach a bank statement)

   "I have read the information in this Certification of Available Finances regarding the cost of tuition and living expenses for the period of study at Creighton’s Intensive English Language Institute. I certify that these funds are available (see documents provided by my bank) and I accept full responsibility for these expenses.

   Name of Person Financially Responsible: ___________________________ Signature: ___________________________

   Date: _____________ / _____________ / _____________ Relationship to the Applicant: ___________________________

3. OTHER FUNDS (Individual[s] in the U.S. or abroad, other than family members, who will be financially responsible for you must sign the statement below and attach a bank statement)

   "I have read the information in this Certification of Available Finances regarding the cost of tuition and living expenses for the period of study at Creighton’s Intensive English Language Institute. I certify that these funds are available (see documents provided by my bank) and I accept full responsibility for these expenses.

   Name of Person Financially Responsible: ___________________________ Signature: ___________________________

   Date: _____________ / _____________ / _____________ Relationship to the Applicant: ___________________________

4. SPONSOR’S FUNDS

   If you will be sponsored by a company, agency, foundation or government agency, please attach a letter from the sponsor listing all the cost and expenses the sponsor will pay and the period of time covered by the support. The letter must be written on official letterhead, include the name, position and signature of the person authorizing the support, and addressed to the Intensive English Language Institute.

   Name of Sponsoring Company, Agency, Foundation or Government Agency: ___________________________

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

SIGNATURE OF THE APPLICANT: ___________________________ DATE: _____________ / _____________ / _____________