

Certification of Finances – For F-1 Student Visas

In your application account, please upload "proof of funds" documents in the "Certification of Finances" section. "Proof of funds" documents can include bank statements, sponsors' statement of support, bank letter, scholarship letter, and cash in investment accounts. U.S.-based pay stubs are accepted to cover living and other expenses (described below). Documents cannot be older than 6 months from the program's start date.

Proof of funding is required for an application to be reviewed for admission, and shows that an international student has sufficient funds for the first year of studies as required by the U.S. government. If admitted, then USF is able to issue an I-20 form for the student, which a student then uses for the F-1 student visa interview at a U.S. embassy or consulate.

Please note: The numbers below are only 9-month and 12-month estimates for the first year of studies. For living and other expenses, each student may spend less or more than what is indicated below.

ESTIMATED First-Year Budget (9-month programs) for International Graduate Students for 2019-2020

		Living	Other	
Program	Tuition	Expenses	Expenses	Total Estimated Costs
Behavioral Health	\$47159.04	\$22240.08	\$6842.16	\$76241.28
Health Informatics	\$24990.08	\$22240.08	\$6842.16	\$54072.32
MSN Master's Entry	\$54086.84	\$22240.08	\$6842.16	\$83169.08
MSN for Registered Nurses with AND	\$36074.56	\$22240.08	\$6842.16	\$65156.8
MSN for Registered Nurses with BSN	\$20833.4	\$22240.08	\$6842.16	\$49915.64
Public Health	\$31917.88	\$22240.08	\$6842.16	\$61000.12
Executive Leadership (DNP)	\$46673.06	\$22240.08	\$6842.16	\$75755.3
Family Nurse Practitioner for RN with BSN (DNP)	\$24990.08	\$22240.08	\$6842.16	\$54072.32
Family Nurse Practitioner for RN with MSN (DNP)	\$34689	\$22240.08	\$6842.16	\$63771.24
Psychiatric-Mental Health Nurse Practitioner for RN with BSN (DNP)	\$41616.8	\$22240.08	\$6842.16	\$70699.04
Psychiatric-Mental Health Nurse Practitioner for RN with MSN (DNP)	\$48544.6	\$22240.08	\$6842.16	\$77626.84
Doctor of Psychology (PsyD)	\$40231.24	\$22240.08	\$6842.16	\$69313.48
Dual Degree - MPH & MSBH	\$44387.92	\$22240.08	\$6842.16	\$73470.16
Population Health Leadership DNP (For RN with MSN)	\$43002.36	\$22240.08	\$6842.16	\$72084.6

Living Expenses is estimate for shared housing (rent), food at home (\$400 per month), and health insurance (\$2,650 for 2018-2019).

Other Expenses is estimate for books, local transit pass and personal expenses such as eating out and entertainment.

Possible additional expenses not included in the above "Total Amount":

- International travel between home country and California.
- Summer session costs if you stay in the U.S. and your program does not require summer attendance (9month program).
- Dependents (spouse and/or child): For 9-month program please add additional \$5,400 per dependent adult. For 12-month program please add \$7,200 per dependent adult. Dependent child requires an additional \$400 for each month of first year of studies.

ESTIMATED First-Year Budget (9-month programs) for International Graduate Students for 2019-2020

Refer to the 2018 - 2019 **ESTIMATED TOTAL COSTS** in the chart above. Your financial documents need to verify that you have the funds for at least the estimated total costs for one year of your program.

- 1. Complete and sign this form.
- 2. If a sponsor (such as a parent or other person) will help to fund your education, he or she must complete and sign this form in the appropriate sections.
- 1. If your sponsor is unable to sign this form, please have him or her
- 2. sign a letter of financial support in English.
- 3. Include a bank statement stating that the required funds are available. Bank statements must be issued by the bank and include the account holder's name and type of account in English. *
- 4. Please note that only accounts such as savings accounts, checking accounts, time deposits, certificates of deposit (CDs) and money market accounts can be used to guarantee your funding. Funds from stocks/investments, lines of credit, or statements of income cannot be considered.
- 5. If you are sponsored by your government or another organization, please include this letter of support.
- 6. Upload this form and any related bank statements and support letters with your online application. Please make two copies of all documents for yourself. If you are admitted to the University, you will need to bring one copy to the U.S. consulate or embassy for your visa interview, and have one copy for immigration purposes
- 7. upon your arrival in the United States.

* Please note that instead of providing bank statements or letters, you may have a bank official sign or stamp all relevant sections of the Certification of Finances form.

Form on the next page



Certification of Finances — for F-1 Student Visas

Graduate Program Applying to:			Application Term				
Applicant/Passport Name							
		FIRST/GIVEN NAME					
DATE OF BIRTH // // COUNTRY OF BIRTH: COUNTRY OF CITIZENSHIP:							
Address Where I-20 to be Sent							
STREET A	DDRESS						
СІТҮ		STATE	ZIP OR POSTAL CODE COUNTRY				
Name of Sponsor(s) (parent or other person):							
Please check one:							
\Box I and/or my sponsor(s) will provide a bank statement or bank letter to verify these funds OR							
\Box A bank official has signed or stamped this form to verify these funds.							
			below. If you or your sponsor(s) will not				
be submitting a bank statement or ba		5					
Applicant's Personal Funds	U.S. 1	\$	_				
BANK NAME			_				
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.							
BANK OFFICIAL'S SIGNATURE/STAMP BANK OFFICIAL'S NAME							
Sponsor's Funds (parent or other person)		\$					
NAME							
			DATE				
BANK NAME							
This is to certify that I have read the information furnished	by the applicant on this forr	n, that it is a true and accurate s	tatement, and that the funds are available.				
BANK OFFICIAL'S SIGNATURE/STAMP			DATE				
BANK OFFICIAL'S NAME		BANK O	FFICIAL'S TITLE				
Sponsor's Funds (parent or other person)	U.S. :	\$					
NAME			PARENT OTHER SPONSOR				
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			DATE				
BANK NAME							
This is to certify that I have read the information furnished							
BANK OFFICIAL'S SIGNATURE/STAMP			DATE				
		BANK U					
Government or Private Scholarship or Loa		\$	_				
PLEASE NOTE: A COPY OF YOUR AWARD LETTER MUST BE SUBMIT	TED.						
AGENCY NAME			AWARD LETTER ENCLOSED				
TOTAL ASSURED AMOUNT (from all source	ces of funds) U.S. S	\$	_				
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.							
			DATE				
APPLICANT'S LEGAL (PASSPORT) NAME	AST/FAMILY NAME	FIRST/GIVEN NAME	MIDDLE/ADDITIONAL NAME				