



INTERNATIONAL STUDENT FINANCIAL STATEMENT FORM

This form is not an application for financial assistance. The Immigration and Naturalization Service requires an international student to show funds are available for the first year of study, and that adequate funding will also be available for subsequent years. **An official letter from a banking institution showing the amount of funds available must accompany this form. Your financial information will be used to ensure compliance with U.S. immigration policy and is necessary to create your immigration document (I-20).**

Annual Expenses for 2022/2023 Academic Year (9 months)/Source of Funding Available to Student

Note: These are approximate costs and are subject to change.

	City College	Undergraduate	Graduate	(Must be completed by the applicant)
Tuition & Fees	\$9,711	\$20,396	\$17,460	Organizational Support: MSU Billings \$ Government \$ Other \$
Books & Supplies	\$1,000	\$1,000	\$1,000	
Health Insurance	\$1,000	\$1,000	\$1,000	
Room & Board	\$8,088	\$8,088	\$8,088	
Expenses for Each Dependent	\$5,000* (Add to total cost if applicable)	\$5,000* (Add to total cost if applicable)	\$5,000* (Add to total cost if applicable)	Personal Funds: Student \$ Sponsor \$
TOTAL ANNUAL COST	\$19,799	\$30,484	\$27,548	Total Funds: 0

Family/Sponsor Certification

This is to certify that I have agreed to provide the amount of funds stated above to the student for the purpose of full-time study at MSU Billings. This commitment will continue for the duration of the student's course of study. **The evidence of my resources in the form of an official bank letter accompanies this statement.** I also understand that it is not the responsibility of MSU Billings to provide financial assistance to the student.

Name of Sponsor Pardeep Kaur Relationship to Student Aunt
 Address of Sponsor Gurudwara Manji Sahib, PB, Jindia
 Signature of Sponsor Pardeep Kaur Date 1 Oct 2022

* Dependents Planning to Accompany Student (This information will be listed on the I-20 or DS-2019 form)

Complete Name (Family Name in Caps)	Date of Birth (MM/DD/YYYY)	Country of Birth	Relationship to Applicant

I certify that the above information provided is a correct statement of my arrangements for financing my studies and I understand that I am responsible for any debts incurred while attending Montana State University Billings.

Name of Student Sehejdeep Kaur Student's Signature Sehej Date 01 Oct 2022



Release of Information Declaration

Please print all items except signature

I, Sehejdeep Kaur (Student's Full Name)

born on 18 Oct 2003 (Date of Birth), hereby declare that

- (Name of individual or agency)

- (Address)

- (E-mail)

is authorized to inquire about and have access to information about my application to Murray State University. I hereby authorize Murray State University to discuss my application and admission status with the above named individual until further written and signed authorization from me.

In addition, I request that you send all correspondence about my application to both the above named individual and me to further expedite my application process.

Sehej

Signature of Student

Sept / 30 / 2022

Date (mm/dd/yyyy)

STATEMENT OF EQUAL OPPORTUNITY

Murray State University endorses the intent of all federal and state laws created to prohibit discrimination. Murray State University does not discriminate on the basis of race, color, national origin, gender, sexual orientation, religion, age, veteran status, or disability in employment, admissions, or the provision of services and provides, upon request, reasonable accommodation including auxiliary aids and services necessary to afford individuals with disabilities equal access to participate in all programs and activities. For more information, contact the Director of Equal Opportunity, Murray State University, 103 Wells Hall, Murray, KY 42071-3318. 270.809.3155 (voice), 270.809.3361 (TDD).