

# FINANCIAL AFFIDAVIT FORM

ast Name (Surname):	NU	First Name (Give	n Name): Me	nak		SF St	ate ID:_	-
ate of Birth (MM/DO/YYYY)	: 08   29 /	Academic Level:	Undergraduate Graduate Credential MBA/MSA/MS	2	Appli	cation Te	rm: 🗹	Spring 2022 Fall 2022
re you currently attending so yes, name of school attendi	thool in the US?	☐ Yes ☑ No	Date expected to	comp	lete (	10010	(YY):	-
2. DEPENDENTS Applicant's who wish to have their or each family member. Attach a  I plan to come with deper	a copy of the mar	riage certificate and passp	n Francisco State Univ ort (for spouse) and b	versity ( pirth cer	must pro	vide additi nd passpo	ional fund ort (for ea	ds of \$5,000 ch child).
I plan to come with deper	idents (ep ,		Date of Birth	1	1////	Relat	ionship	to Applicant
Surname/Family Nam	e	First/Given Name						•••
Surname/Family Nam	e .	First/Given Name						
	*	First/Given Name						
3. SOURCE OF FUND	ING and source of fu		tach sponsor financia holarship (attach awar	ncial do I docum d letter)	nent and	nd sign Ap	oplicant /	agreement) Agreement)
3. SOURCE OF FUND Please indicate in USD amount(s  USD \$  + USD \$  + USD \$  + USD \$	ING and source of fu	unds: Student's Personal Funds ( Funds from Sponsor(s) (at Loans (attach loan letter) Government or Private Sc Total (this amount must be	tach sponsor financia holarship (attach awar greater than or equal to	d letter)	ment and	nd sign Ap	oplicant A Sponsor	agreement) Agreement)
3. SOURCE OF FUND  Please indicate in USD amount(s  USD \$  + USD \$  + USD \$  + USD \$  - USD \$  - USD \$	ING and source of fue 29.4  MENT Harwin	Student's Personal Funds Funds from Sponsor(s) (at Loans (attach loan letter) Government or Private Sc Total (this amount must be	holarship (attach awar greater than or equal to	d letter)	mount fro	nd sign Apcomplete	Sponsor ed expense	Agreement) Agreement) es on page 1)

This is to certify that all information given on this form is complete and accurate to the best of my knowledge. I guarantee that the funding is available for the first year of study. I am fully aware that any false or misleading statement will result in an automatic denial of admission.

Applicant's Signature	Mehak	Date 18 dry 2022
	0.01	



Applicant's Signature

# FINANCIAL AFFIDAVIT FORM

18 Aug 202

	FNU	First Name (Giver	Name):	1ehak	SF State I	D:
ast Name (Surname):	1: 08   29   2	003 Academic Level:	☐ Undergradu☐ Graduate☐ Credential☐ MBA/MSA/I☐ MPA		plication Term:	☐ Spring 2022 ☐ Fall 2022
are you currently attending s f yes, name of school attend	school in the US?	□ Yes ☑ No	Date expected	to complete (	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
2. DEPENDENTS Applicants who wish to have the or each family member. Attach  I plan to come with depe	a copy of the marria	ige certificate and passpor	Francisco State Urt (for spouse) an	University must ; d birth certificat	provide additional se and passport (fo	funds of \$5,000 or each child).
Surname/Family Nan		irst/Given Name	Date of Birt	h == 1 = 0 / × ×	Relations	hip to Applicant
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+ USD \$	5. 8 Fu	udent's Personal Funds (a inds from Sponsor(s) (atta pans (attach Ioan letter) overnment or Private Scho otal (this amount must be gr	ich sponsor finan olarship (attach av	cial document a	nd complete Spon	sor Agreement)
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= USD \$ 0.00 9  4. SPONSOR AGREE  Name of sponsor(s)	Pard	lep	Relationshi	p to student _	factly m (are) submitting	<u>U</u> financial
= USD \$ 0.00 9  4. SPONSOR AGREE  Name of sponsor(s)	Pard	to provide the funds for st ds for the first year and a	Relationshi	p to student _	factor m (are) submitting able for each subs	financial equent year.
= usp \$ 0.00. 9  4. SPONSOR AGREE  Name of sponsor(s)  This is to certify that I (we) the document(s) indicating the available.	Pard Pard e undersigned agree to allability of these fun	lep	Relationshi	p to student _ nd that I (we) ar ount will be avail	factor m (are) submitting able for each subs	financial equent year.



# FINANCIAL AFFIDAVIT INSTRUCTIONS

All applicants planning to be in F-1 status are required to complete this form and provide financial supporting documents to demonstrate their ability to pay all tuition, fees and living expenses for the first year of their academic program. An I-20 Certificate of Eligibility will be issued to the student once admitted to the University and financial documents have been verified.

#### INSTRUCTIONS

- Complete and submit page two of this form. Handwritten signatures are required.
- 2. Attach photocopies of your financial documents and a certified English translation (if applicable)
- 3. How to submit:
- Upload the completed form and copies of financial documents as a PDF attachment to the Program Materials section of the Cal State Apply online application; OR
  - Email the completed form and copies of financial documents as a PDF attachment to: Undergraduate Admissions at ugintl@sfsu.edu or Graduate Division at gradstudies@sfsu.edu

#### **ESTIMATED EXPENSES**

Estimated expenses are for one academic year. Estimated expenses are subject to change without prior notice and actual expenses

nay vary.		D C Board	Other Expenses**	Total
1	Tuition & Fees	Room & Board		\$41,894.00
	\$16,632.00	\$18,270.00	\$6,992.00	
Undgraduate		\$18,270.00	\$6,992.00	\$40,160.00
Graduate*	\$14,898.00		\$6,992.00	\$39,644.00
Credential	\$14,382.00	\$18,270.00		
		\$18,270.00	\$6,992.00	\$46,880.00
MBA/MSA/MSBA	\$21,618.00	F. 20. 10 E. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	\$6,992.00	\$41,860.00
MPA	\$16,598.00	\$18,270.00	70,002.00	

<sup>\*</sup>Graduate: Includes Post Baccalaureate and 2nd Baccalaureate Degree

#### FINANCIAL DOCUMENTATION

Financial documents that demonstrate proof of funding must:

- Be in English or be accompanied by a certified English translation
- Be on official bank letterhead, with bank stamp or bank officer's signature
- Show minimum funding required for one academic year and include type of currency
- Include an issue date that is no earlier than June 1 for Spring applications and October 1 for Fall applications.
- Include the account holder's name (if account not in student's name, then name on financial document must match name of sponsor in Sponsor Agreement section of Financial Affidavit Form)

#### ACCEPTABLE DOCUMENTS

- Bank Letters
- Bank Statements (from Saving or Checking Accounts)
- Fixed/Term/Time Deposits Must be able to be withdrawn at any time without penalty
- Loan Letters
- Scholarship Letters (Government, Private or School)

<sup>\*\*</sup>Other Expenses: Books, Supplies, Transportation, Personal Expenses, and SF State Sponsored Health Insurance plan. Students must purchase the SF State Sponsored Health Insurance plan before class registration: http://oip.sfsu.edu/f1insurance.



## AFFIDAVIT OF FINANCIAL SUPPORT

All F-1 students are required to provide documentation of financial support before a Form I-20 can be issued.

If the student will use his/her own personal funds as the source of financial support, the student MUST PROVIDE A BANK STATEMENT showing the availability of at least \$35,000 (undergraduate) or \$34,000 (graduate) in liquid assets. Bank statements and financial affidavits should be dated no earlier than June 1st for spring applications or October 1st for fall applications.

If the student will be supported by a private sponsor (family member, friend, or private institution), the sponsor must sign the Statement of Financial Obligation below. In addition, sponsors **MUST PROVIDE A BANK STATEMENT** showing the availability of at least \$35,000 (undergraduate) or \$34,000 (graduate) in liquid assets.

If the student will be sponsored by a public agency (embassy, home government, public institution, religious organization, etc.), the agency must provide written verification that the costs will be covered. Sponsorship statements should reflect the semester and year of the application.

**Estimated Student Expenses for One School Year (2 semesters)** 

(These amounts are estimates and are subject to change without notice. Actual expenses may vary.)

(These amounts are estimates and are subject to	UNDERGRADUATE 24 UNITS / 2 SEMESTERS	GRADUATE 18 UNITS / 2 SEMESTERS	
XPENSES	\$16,374.00	\$15,432.00	
Tuition	1.826.00	1,598.00	
Books and Supplies	13.050.00	13,050.00	
Room and Meals	2.076.00	2,076.00	
Insurance (12-month coverage)	1.674.00	1,844.00	
Other expenses (including transportation & personal expenses)	1,75	\$34,000.00	
TOTAL	\$35,000.00	tional documentation of financial	

Family Members. Students who will be accompanied by a spouse and/or children must submit additional documentation of financial support (\$5,000 for spouse and \$3,000 for each child). Note: MBA and MSA students pay an additional amount of \$270.00 per unit.

#### **Statement of Financial Obligation**

Students requiring a form I-20 must complete this Statement of Financial Obligation and supply all appropriate documentation of financial support. If the student will be supported by funds other than his/her personal funds, the sponsor must sign below. If more than one sponsor will provide financial support, each sponsor must sign our Financial Affidavit form, and each sponsor must provide an official bank statement showing the availability of the necessary funds (please see **Estimated Student Expenses** above). Avoid entering personal information on public computers and/or public wireless access points. Relationship to Student: Sponsor's Name: Sponsor's Signature: Student's Name: Student's Signature: By signing above, the student and sponsor certify that sufficient financial resources will be available to cover all expenses for the duration of studies at California State University, Northridge (CSUN). Further, by signing above, the student agrees to maintain adequate health insurance for the duration of studies. If a spouse and/or children will be included on the I-20, provide the following information. (If necessary, use an extra sheet of paper.) Date of Birth Spouse (Family or Surname) Female Country of Citizenship: Country of Birth: Date of Birth Given Name Child (Family or Surname) Male Female

Country of Citizenship:

Country of Birth:

#### CSUN Affidavit of Financial Support, Page 2 of 2

		* * *
Name as it appears on Passport:	-	First Name or Given Name
Off Fassport	Family Name or Surname	First Name of diversions
		Gender: Female Male
Date of Birth (Month,	Day, Year):	
COLOTIL	Country	of CITIZENSHIP:
If you are currently in	the United States, what type of visa do you hold? (For	example, F-1, F-2, B-1, J-1, A-2, etc.):
	Permanent address in your HOME COUNTR	Y: Please print or type clearly
Street Address:	VPO GEONG Distt;	
City:	Kaitharl Postal Code: 136	5 Country: India
Phone number in Ho	OME COUNTRY: 491 155006 2-11	
Email Address:	mehakfnu 29 @ gmouil · C	Cem
1. Are you transferr	ing to CSUN from a U.S. school (including language sch	nool, high school, college, university)? YES NO
Name of Sch City and Stat		
Month and	e of Scriool.  /ear you ended, or plan to end, your enrollment at that	school:
	ating in Optional Practical Training (OPT) for F-1 Studer	
	ered YES, please provide the following information:	
	nool that authorized your OPT:	
	and Year your OPT began:	

Please complete **both pages** of this form and mail or email it to the address below. Your I-20 cannot be issued until we have received this completed form and all required documentation of financial support. If you are transferring from a school in the U.S., that school must first transfer your I-20 to us in the SEVIS database.

California State University, Northridge International Admissions, Bayramian Hall 160 18111 Nordhoff Street Northridge, CA 91330-8207

Email: intladm@csun.edu



STATE UNIVERSITY NORTHRIDGE

## AFFIDAVIT OF FINANCIAL SUPPORT

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If the student will be sponsored by a public agency (embassy, home government, public institution, religious organization, etc.), the agency must provide written verification that the costs will be covered. Sponsorship statements should reflect the semester and year of the application.

### **Estimated Student Expenses for One School Year (2 semesters)**

(These amounts are estimates and are subject to change without notice. Actual expenses may vary.)

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	UNDERGRADUATE 24 UNITS / 2 SEMESTERS	GRADUATE 18 UNITS / 2 SEMESTERS
XPENSES	\$16,374.00	\$15,432.00
Tuition	1,826.00	1,598.00
Books and Supplies	13,050.00	13,050.00
Room and Meals	2.076.00	2,076.00
Insurance (12-month coverage)	1.674.00	1,844.00
Other expenses (including transportation & personal expenses)	1,21	\$34,000.00
TOTAL	\$35,000.00	·

Family Members. Students who will be accompanied by a spouse and/or children must submit additional documentation of financial

Family Members. Students who will be accompanied.  Note: MBA and MSA students pay are support (\$5,000 for spouse and \$3,000 for each child).	1 additional amount of \$270.00 per diffe.
support (\$5,000 for spouse and \$5,000 for each party	
Students requiring a form I-20 must complete this Statement of Financial Obligation and financial support. If the student will be supported by funds other than his/her personal one sponsor will provide financial support, each sponsor must sign our Financial Affidav official bank statement showing the availability of the necessary funds (please see Estim Avoid entering personal information on public computers and/or public wireless access Sponsor's Name:  Relation	d supply all appropriate documentation of funds, the sponsor must sign below. If more than it form, and each sponsor must provide an nated Student Expenses above).
Student's Name:  Student's Signature:  By signing above, the student and sponsor certify that sufficient financial resources will duration of studies at California State University, Northridge (CSUN). Further, by signing adequate health insurance for the duration of studies.  If a spouse and/or children will be included on the I-20, provide the following information.	tion. (If necessary, use an extra sheet of paper.)
Spouse (Family or Surname )  Country of Birth: Country of Citizenship:	Female Male
Child (Family or Surname) Given N	Name Date of Birth  ☐ Female ☐ Male

Country of Citizenship:

Country of Birth:

Female

#### CSUN Affidavit of Financial Support, Page 2 of 2

Name as it appears		
on Passport:	Family Name or Surname	First Name or Given Name
	Tarring Training	
	Day Vearly	Gender: Female Male
Date of Birth (Month	, Day, Year):	
		Country of CITIZENSHIP:
Country of BIRTH:		
If you are currently in	the United States, what type of visa do you h	old? (For example, F-1, F-2, B-1, J-1, A-2, etc.):
if you are currently if		
	Permanent address in your HOME	COUNTRY: Please print or type clearly
Street Address:	UPO Geong	Dust
_	1. 0	
City: _	Routhal	ode: 136027 Country: India
Province or State:	Houyana Postal C	ode: 136024 Country.
	LOI 9 000	002(13
Phone number in H	OME COUNTRY:	
Email Address:	mehakfnu	29@gmail· com
Lillan Address.	<b>.</b>	
	in the CSUN from a U.S. school (including lan	guage school, high school, college, university)? YES NO
1. Are you transfer	ing to Csold from a cist series (with	All and
If you answe	red YES, please provide the following informa	ition:
Name of Sch	ool:	
	te of School:	
City and sta	Year you ended, or plan to end, your enrollme	nt at that school:
2. Are you particip	ating in Optional Practical Training (OPT) for I	-1 Students? YES NO
	ered YES, please provide the following inform	
	,	and ending date:
Month, Day	and Year your OPT began:	and ending date.
		A 20 separat haissuad until

Please complete **both pages** of this form and mail or email it to the address below. Your I-20 cannot be issued until we have received this completed form and all required documentation of financial support. If you are transferring from a school in the U.S., that school must first transfer your I-20 to us in the SEVIS database.

California State University, Northridge International Admissions, Bayramian Hall 160 18111 Nordhoff Street Northridge, CA 91330-8207

Email: intladm@csun.edu



# FINANCIAL STATEMENT OF INTERNATIONAL UNDERGRADUATE STUDENTS

This form must be fully completed before the I-20 or DS-2019 can be sent to you. It is your responsibility to demonstrate that sufficient funding is available to meet all university and living expenses for one year of your studies and that such funding will be available to you for the duration of your academic program. Forms that are incomplete or lacking satisfactory documentation will not be accepted. Serious delays will be avoided by paying careful attention to each item.

1000	Student Name FNU	Melierk	
1)	Student Name Family Name	First	Middle
	8	(All amounts should be in	IS Dollars)
2)	Source of Funds: You Must Submit:	(All amounts should be in	47.9
	n n	ا ا	Original Certified Bank Statement
			Grigina.
	e e .		Original Certified Bank Statement
			Oliginal Column
	т.		Official Letter of Funds and Duration of Award
			Official Letter of Fundound 2 and
			Official Letter of Funds and Duration of Award
	1 , 1		Official Letter of Funds and Burdan
3)	Sponsor (to be completed by the sp	onsor): Paud	2ep
	This is to certify that I, — —	(sponsor's name printed)	
			er for tuition fees, and living expenses
	will provide funds in the amount of a	t least \$64,347.00(U.S.) per ye	ar for tuition, fees, and living expenses
	for Mehak		
	( + . dontto nama printed)		
	This level of support will continue for	or the duration of the program	of study. Further, lunderstand that I am responsible for any y of New Haven.
	and all debts incurred by the studen	it write attending the	sor's relationship to student: father
	Sponsor's annual income:	Spor	sors relationship to student.
		2 - Geong D	stt_
	Sponsor's Address.	.( )	
	Ka	ithal s Kary	mac O L.
		Ludia	foulty.
			(Sponsor's Signature)
	To be signed by the student: Icer	tify that the statements given t	by me in this form are complete and accurate. Furthermore, I ove, be interrupted or stopped; and lunderstand that the
take	all financial responsibilities should my	Iditional financial assistance in	scholarship form and that permission for employment is
Univ	rersity of New Haven cannot give any ac- cult to obtain from the U.S. Department	of Immigration and Naturalizati	on.
			Date, 1+ Aug 1071
Stud	dent's Signature		0,



# FINANCIAL STATEMENT OF INTERNATIONAL UNDERGRADUATE STUDENTS

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	OL start Name	FNU	Mehak		
1)	Student Namo	mily Name	First	Middle	
٥١	Source of Funds: Y	ou Must Submit:	(All amounts should be in	US Dollars)	
2)	Source of an action		\$ 36 56	37 ,5	
				Original	Certified Bank Statement
				Origina	Certified Bank Statement
		· ·		Official Latter of Fu	nds and Duration of Award
				Official Letter of Far	
		,		Official Letter of Fur	nds and Duration of Award
3)	Sponsor (to be co	mpleted by the spon	sor):  Harwing (sponsor's name printed)	dor Kaur	
	This is to certify	mat i, —	(sponsor's name printed)		
	for (chudoptier	Mehak	5a5t \$04,547.00(0.0.7) per y		
	This level of suppo	rrad by the student v	Wille attending the officers.	of study. Further, lunderstand ty of New Haven.	
	and all dahte incul			and the same of th	24 · 30 T
	and all debts incui Sponsor's annual	income:, \$ 36	<u>637-5</u> Spoi JS Dollars)	nsor's relationship to student:	Autu
	and all debts incui Sponsor's annual	income:, \$ 36	637.5 Spoil	nsor's relationship to student:	AUTA
	and all debts incui Sponsor's annual	income:, \$ 36	637.5 Spoi JS Dollars) 26 Storet 1? Le Malo M 4 - 147001	s, bhakher ofera, 048	sinderfram (
	and all debts incur Sponsor's annual Sponsor's Add	income: \$36 (Income: C-13 Aress: C-13 Exclau Patiala	e : Malo M n - 147001	s, bhakhua ajera, 048	Windurkaum (Sponsor's Signature)
ake Univ	and all debts incur Sponsor's annual Sponsor's Add To be signed by all financial responsib	income: \$36 (In Income: C-12  Aress: Crclau  Patiala  the student: Icertify pilities should my sou	that the statements given	by me in this form are complete pove, be interrupted or stopped; in scholarship form and that perr	(Sponsor's Signature) and accurate. Furthermore