

FRESNO STATE

California State University, Fresno

VISA INFORMATION FORM

NAME: HARSHMINDER SINGH BIRTHDATE: 02/19/2003
First Name - Last / Family Name - Middle Initial MM/DD/YYYY

Do you now hold a valid U.S. visa? Yes No If Yes, what type (F-1, J-1, E-2, etc.):

If you hold an F-1 visa, list the institution that issued your I-20, and your SEVIS Identification number (top right-corner of I-20):
 INSTITUTION / SCHOOL: _____ YOUR SEVIS ID #: _____

If you hold a J-1 visa, list the institution that issued your DS-2019, and your SEVIS Identification number. Also give the name, email address, phone, and fax number of the Responsible Officer at this institution:

INSTITUTION / SCHOOL: _____ YOUR SEVIS ID #: _____
 RESPONSIBLE OFFICER (RO): _____ EMAIL: _____ PHONE: _____ FAX: _____

If family members will be coming to the USA with you, please complete the information below:

NAME <small>(FIRST, LAST, MIDDLE INITIAL)</small>	BIRTHDATE <small>(MM/DD/YYYY)</small>	COUNTRY OF BIRTH	GENDER <small>(M or F)</small>	RELATIONSHIP <small>(i.e. SPOUSE, SON, DAUGHTER)</small>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Statement of Financial Sponsorship

Students must have sufficient money to meet all expenses while attending California State University, Fresno. The amount needed for one academic year is approximately \$23,000 for graduate students and \$26,000 for undergraduate students. Please complete the information below about your sponsor. Request your sponsor to send a bank letter/statement showing amount and source of support. If your sponsor is a government agency, organization, or other group, you must attach a separate letter from your sponsor that includes the terms of the sponsorship (in English).

SPONSOR'S NAME: PARBHAT KHURANA
 SPONSOR'S ADDRESS: VPO KHIZRABAD, YAMUNANAGAR - UP, 135021, INDIA
 SPONSOR'S PHONE NUMBER(S): +91-9465730028
 SPONSOR'S RELATIONSHIP TO YOU: UNCLE
(i.e. PARENT, UNCLE, FRIEND, ETC.)

Documentation Required

As part of the application for Admissions, The U.S. Citizenship and Immigration Services requires that, all F-1 (Certificate of Eligibility for Non-immigrant - Form I-20) and J-1 (Certificate of eligibility for Exchange Visitor Form DS-2019) applicants provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. college/university.

If the student will use their own personal funds as the main source of financial support, **the student must fill out the form and must provide their official bank statement showing available funds.**

If a private sponsor such as a family member, friend, private institution, or employer will sponsor the student, the sponsor must sign the Statement of Financial Obligation below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student's duration of study at CSUSB. In either case, **the sponsor must also provide an official bank statement showing available funds in liquid assets.**

If a public agency such as an embassy, home government, public institution or religious organization will be sponsoring the student, **the agency must sign the Statement of Financial Obligation below and provide official certification that the appropriate costs will be covered.**

***Bank statements must be signed and/or seal by bank and cannot be older than 6 months from the date the student applied to CSUSB.**

Student Information

Last Name: LNU First Name: HARSHMINDER SINGH Middle Initial:

Permanent Foreign Address: VILLAGE UPLI, DISTT SANGRUR, PUNJAB - 148001, INDIA

Estimated Student Budget for One Academic Year (2 Semesters)

Expenses	Undergraduate (24 Units)	Graduate (12 Units)	MPA (12 Units)	MBA/MSA/ MS-IST/MSEI (12 Units)	Second Bachelor (24 Units)	Doctorate (12 Units)
Tuition & Fees <small>includes non-resident fees</small>	\$16,987	\$13,669	\$14,929	\$16,909	\$18,421	\$18,331
Living Expenses	\$13,780	\$13,780	\$13,780	\$13,780	\$13,780	\$13,780
Books & Supplies	\$1,392	\$1,392	\$1,392	\$1,392	\$1,392	\$1,392
Transportation	\$1,520	\$1,520	\$1,520	\$1,520	\$1,520	\$1,520
Health Insurance	\$2,412	\$2,412	\$2,412	\$2,412	\$2,412	\$2,412
Personal/Misc.	\$1,942	\$1,942	\$1,942	\$1,942	\$1,942	\$1,942
Total	\$38,033	\$34,715	\$35,975	\$37,955	\$39,467	\$39,377

*NOTE: All fees are subject to change without notice.

**Graduate Business Professional Fee: \$270/unit (MBA/MSA)/\$105. (MPA) included in above calculation.

Dependent Information

If your spouse or children will accompany you to the United States, you must provide proof of additional funding of **\$1,800** for a spouse and **\$1,200** per child per academic year (2 semesters) in order for their names to be listed on your I-20. **We also request copies of marriage certificate and family registry.** Please also include copies of your dependents passport and visa (if applicable). Below, list your dependents accompanying you to the United States.

Last Name	First Name	Relation	Country of Birth	Country of Citizenship	Date of Birth (MM/DD/YYYY)
NA					

Personal Financial Support

You must finish verification for financial support for the entire academic year. Complete **any of the three** sections below that are applicable. Give **all amounts in U.S. Dollars (USD)**. If there is more than one sponsor or bank in any category, you must attach all other letters, signatures and certificates (originals only).

Personal Support: My personal financial resources at this time are \$ USD.

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Private Support/Sponsor

I guarantee, without reservation, to support the educational costs and living expenses, including tuition fees, books and supplies, room and board, health insurance, medical or emergency expenses, travel and other miscellaneous expenses for (print name of student): HARSHMINDER SINGH while he/she is enrolled at California State University, San Bernardino. I also agree to furnish additional support for this student's dependents as listed previously on this form or any other that may later come to the United States. I further guarantee that the student will not become a public charge during his/her stay in the United States.

Sponsor's Name (Print): PARBHAT KHURANA Date: 27/04/2023

Sponsor's Signature: Parbhat Khurana

Relationship to Applicant: UNCLE

Address: VPO KHIZRABAD, YAMUNANAGAR, 135201, INDIA

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ 30616.83 on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:



Government, Foundation Agency or Corporate Fellow Support

Please submit this form to the agency providing your financial support for certification of the required information or instruct the agency to send a letter to the International Student Admissions Office as well as the Student Accounts Office at California State University, San Bernardino specifying the amount of the award, period of support, and any condition or terms that pertain.

Agency Name:

Address:

I certify that the agency named above will provide the applicant the equivalent of \$ USD per year for the duration of his/her studies.

(Continue next page)

Documentation of Financial Support for
International Students

Print Name of Agency Official: Date:

Signature of Agency Official: Title:

Address:

Certification by Applicant

The above information is complete and correct to the best of my knowledge.

Print Name:

Signature: Date:

Revised: 04/08/2022

California State University, Sacramento

Affidavit of Financial Support for International Students (F-1)

The Immigration and Naturalization Service requires that all students provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. university. Thus, you must complete all areas of this affidavit that apply, including original signatures. The combined U.S. dollar amount from your sponsor(s) must equal or exceed the minimum listed on the instruction sheet. Bank verification of funds must not be older than six months. PLEASE NOTE YOUR APPLICATION FOR ADMISSION WILL NOT BE PROCESSED WITHOUT THIS FORM AND A BANK VERIFICATION FROM YOUR FUNDING SOURCE STATED IN U.S. DOLLARS.

PERSONAL INFORMATION

Family/Last Name (Name on passport) LNU		First Name (Name on passport) HARSHMINDER SINGH
Country of Birth INDIA	Country of Citizenship INDIA	Date of Birth (month/day/year) FEBRUARY 19, 2003
Term applying for <input checked="" type="checkbox"/> Fall <input type="checkbox"/> Spring	Year 2023	Email Address harshp.2003@gmail.com

SELF, SPONSOR, OR GOVERNMENT FUNDING

Please check all appropriate boxes:

Self
 Sponsor (Parents, Relative, others)*

Assured amount in U.S. Dollars

In US Dollars

In US Dollars
\$ 30616.83

I, **PARBHAT KHURANA** certify that I will assume full financial responsibility, including educational and living expenses for while he/she is enrolled at California State University, Sacramento.

HARSHMINDER SINGH
 (Name of Student)

Signature of Sponsor
Parbhat Khurana

Relationship to applicant
UNCLE

Telephone Number
+91-9465730028

Address **UPO KHIZRABAD, YAMUNA-NAGAR, 135021, INDIA**

City/Country **INDIA**

Zipcode **135021**

* If a sponsor other than a parent is providing all or partial financial assistance, a letter signed by the sponsor must accompany this form that specifies the terms of the support, the U.S. dollar amount to be covered for tuition and/or living expenses, and the duration of the sponsorship.

Government or other Organization Scholarship*

Source of Scholarship

U.S. Dollars

*This includes embassies, government loan agencies, government contract agencies, CSU schools and departments, athletic scholarships, and approved non-resident tuition waivers. Please send an original signed copy of the award letter on organizational letterhead that specifies in English the terms of the support, the U.S. dollar amounts to be covered for tuition and/or living expenses and the duration of the sponsorship.

Additional Funding from another source: If someone provides room and board at no expense to you, list that person's name and address.

Signature of Sponsor

Sponsor's Name

Address

City/country

Zipcode

Telephone Number

F-2 DEPENDENT INFORMATION

Applicants who plan to bring dependents please complete the following:

If you are married and plan to have your dependent(s) live in the U.S. while you are attending California State University, Sacramento, you will need to include in your calculation of academic years costs, the amounts of \$3,000.00 for your spouse and \$3,000.00 each child.

Family / Last Name	First Name	Middle Name	Gender	Date of Birth	Country of Birth	Country of Citizenship
Spouse						
Child						
Child	NA					
Child						

I certify that the statements made above are true, complete and accurate. I understand that providing false or misleading information can result in the denial of my application, or if admitted in my disenrollment for California State University and / or deportation from the United States.

Applicant's signature: **Harsh (Harshinder Singh)**

Date: **27/04/2023**