

The University of South Dakota

Graduate Financial Ability Form



Estimated Cost of Attendance:

Average graduate costs for 10 months:

Tuition and Fees (18 credit hours).....\$13,441
Living Expenses.....\$10,000
Other (books, insurance, discipline fees, etc)²\$2,400
Total without dependants²\$25,841

If bringing dependents, add \$4,500 each for food + medical insurance
(4,500 x (number of dependents) + \$25,841)

¹ Cost of attendance increases approximately 3-5% each year. The most up-to-date cost of attendance is made available every April for the next academic year.

² Actual insurance costs vary based on the specific plan and the age of the student/enrollee.

Checklist

- ☐ Bank documents
- ☐ Documents proving scholarship or loan (if applicable)
- ☐ Copy of visa (if currently in USA)
- ☐ Copies of your current I-20 (if applicable)
- ☐ Copy of passport ID page
- ☐ Copies of dependent passport(s) (if applicable)

Student Information

Last/Family/Surname		First/Given Name		Middle
Birthdate		☐ Female	☐ Male	Email
City of birth		Country of birth		
Citizenship country		Country of current residence		

Dependent Information

If a spouse or dependent child will accompany you to the USA on an F-2 or J-2 visa(s), your financial documents(s) must show that you have sufficient funds to cover their living expenses. The information below is necessary for the form I-20. Please also attach copies of their passports.

Relation	Gender			
☐ Spouse	☐ F ☐ M	Family/Surname	First/Given Name	Place of birth
				Citizenship
☐ Child	☐ F ☐ M	Family/Surname	First/Given Name	Place of birth
				Citizenship
☐ Child	☐ F ☐ M	Family/Surname	First/Given Name	Place of birth
				Citizenship

The University of South Dakota International Office Financial Ability Form

Financial Support

In the section below, indicate the financial sources and amounts, in US dollars, that you will use to cover all educational and living expenses (and those of any dependents) for each year of attendance. At minimum, your financial sources must cover the estimated average graduate costs shown on page 1.

Sources of Support	Amount Provided Annually	Years Provided
Self	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Individual Sponsor I	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Individual Sponsor II	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Scholarship (including University of South Dakota awards)	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Other, including educational loans	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
Total Funds	\$ _____	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

You are advised to keep the original copies of the financial documents you have submitted because the same information will be required for your visa interview at the United States Consulate and at Immigration when you first enter the United States.

Sponsor Information

All sponsors should include a bank statement or certificate of balance showing readily available funds sufficient to cover the first year's contribution. Sponsors must also indicate the number of years they will provide support (a master's degree is typically earned in two years and a Ph.D. in five–seven years). If you have secured a scholarship, the award letter should be included and should indicate the amount and length of the award. If you have an educational loan from your home country, please include a detailed letter or document from the financial institution.

The most common examples of readily available funds (liquid assets) are bank statements, bank or investment letters, certificate of deposits, and investment portfolios. You must provide an official or certified copy of a bank statement for a checking or savings account (liquid assets), or an official, certified copy of a letter from the bank holding the checking, savings account, or other liquid asset. All documents should be in English or accompanied by an official translation.

Certification of Support

If the student has more than one private sponsor, please submit a separate form for each individual sponsor.

Sponsor: This affidavit is made by me for the purpose of assuring the United States government that the person named

_____ (student name) will not become a public charge while in the USA. I am willing and able to maintain and support the person named above by providing US\$ _____ per year for a period of _____ years.

_____	_____	_____
Last/Family/Surname	First/Given Name	Middle
_____	_____	_____
Sponsor's relationship to the student	Email	

Sponsor's physical address		

_____		_____
Sponsor's signature		Date

Applicant (student): My signature certifies that all information provided on this form is complete and accurate, and that I accept responsibility for all expenses I and my dependents incur (including required family health insurance) during my attendance at USD. With the exception of any financial assistance already offered to me by the university, I do not expect USD to provide me with financial assistance or employment.

_____	_____
Applicant's signature	Date

Upload this and supporting documentation in your USD application portal. Do not email.