# The University of South Dakota International Office

Undergraduate Financial Ability Form



Estimated Cost of Attendance:			
Estimated Cost of Attendance.		Checklist	
Average undergraduate $\cos t^1$ for the term of 10 more	nths:	☐ Bank documents	
Tuition and fees (30 credit hours)	\$12,942.00		
Housing	\$4,658.00	☐ Documents proving scholarship or loan (if applicable)	
Food Service	\$3,998.00	☐ Copy of visa (if currently in USA)	
Other (books, insurance, discipline fees, etc.) $^{\!2}$	\$2,000.00	☐ Copies of your current I-20 (if applicable)	
Total without dependents	\$23,598.00	Copy of passport ID page	
If bringing dependents add \$4500 each for food + n (4,500 x (number of dependents) + \$23,5 \cdot 2.50 of attendance increases approximately 3-5% each year. The attendance is made available every April for the next academic ye <sup>2</sup> Actual insurance costs vary based on the specific plan and the age.	598.00) most up-to-date cost of ear.	☐ 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	
		or J-2 visa(s), your financial documents(s) must show that you have sufficient or the form I-20. Please also attach copies of their passports.	
- '	on below is necessary in	of the form 1.20.1 rease also attach copies of their passports.	
Relation Gender  Spouse F M			
Family/Surname	First/Given Nam	e Place of birth Citizenship	
□ Child □ F □ M			
Family/Surname	First/Given Nam	e Place of birth Citizenship	
□ Child □ F □ M Family/Surname	First/Given Nam	e 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 undergraduate costs shown on page 1.

Sources of Support	Amount Provided Annually	Years Provided
Self	\$	_
Individual Sponsor I	\$	_ 01 02 03 04 05
Individual Sponsor II	\$	_ 01 02 03 04 05
Scholarship (including Univerisity of South Dakota awards)	\$	_ 01 02 03 04 05
Other, including educational loans	\$	_ 01 02 03 04 05
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 must 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 bachelor's degree is typically earned in four to five years). If you have secured a scholarship, attach the award letter, which 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 and may be submitted via email to isrt@usd.edu.

Applicant's signature

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 Email Sponsor's relationship to the student Sponsor's physical address Sponsor's signature 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.

Email this form and all documentation to: isrt@usd.edu