The purpose of the Certification of Finances is to help colleges and universities obtain complete and accurate information about the funds available to international applicants who want to study in the United States. Strict government regulations, rising educational costs and economic conditions have made verification of financial resources of international applicants essential. Institutions do not have the option of deciding whether or not to verify the financial resources of their international applicants; financial verification must be made prior to institutional issuance of Certificates of Eligibility (Form I-20 or IAP-66).

The form is designed to standardize financial information provided by applicants to colleges, universities, and United States consuls. By completing and returning the form to the college/university requiring it, an applicant, if admitted, may obtain that college’s authorization and issuance of a Certificate of Eligibility (Form I-20 or IAP-66). If parents and/or sponsors are unable to obtain a bank official’s verification, it is recommended that institutions forward a copy of the Foreign Student Financial Aid Application to the family for completion. The institution should attach a copy of the Certification to the Certificate of Eligibility. United States consuls scrutinize the statements of financial resources given by nonimmigrant visa applicants. The Certification will help such officials make their decisions and expedite visa issuance.

Return this form directly to the McMurry University, McM Station Box 278, Abilene, TX  79697. Do not send it to the College Scholarship Service® or International Education at the College Board.

### Estimated Annual Full-Time New Student Direct Cost for 2008-2009*

**Full-Time**

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$17,225.00</td>
</tr>
<tr>
<td>Fees</td>
<td>$ 910.00</td>
</tr>
<tr>
<td>Room and Board</td>
<td>$ 6,657.00</td>
</tr>
<tr>
<td>Books and Supplies</td>
<td>$ 1,200.00</td>
</tr>
<tr>
<td>Personal Expenses</td>
<td>$ 2,000.00</td>
</tr>
<tr>
<td>Transportation in U.S.</td>
<td>$ 700.00</td>
</tr>
</tbody>
</table>

**TOTAL** $28,692.00  
(Annual Direct and Indirect Cost)

*Tuition and Fees have not been finalized for 2009-2010.
INTERNATIONAL STUDENT CERTIFICATION OF FINANCES

1. YOUR NAME
   Mr.  
   Miss  
   Mrs.  
   FAMILY (Surname)  GIVN (First)  MIDDLE

2. PERMANENT ADDRESS
   ____________________________________________________________

3. MAILING ADDRESS (if different from above)
   ____________________________________________________________

4. DATE OF BIRTH
   MONTH  DAY  YEAR

5. PLACE OF BIRTH (country)

6. COUNTRY OF CITIZENSHIP

8. Enter the expected amount of annual support from the sources listed below. Enter amounts in US dollars. Please PRINT all entries. Use an additional sheet of paper for explanations, if necessary.

<table>
<thead>
<tr>
<th>STUDENT'S SOURCES OF FUNDS</th>
<th>ASSURED SUPPORT</th>
<th>PROJECTED SUPPORT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FIRST YEAR</td>
<td>SECOND YEAR</td>
</tr>
</tbody>
</table>

8a. PERSONAL OR FAMILY SAVINGS
   NAME OF BANK
   ____________________________
   A bank official's signature is required on the certification if the student is partially or totally supported by personal savings.

8b. PARENTS
   Money available from sources other than savings.
   ____________________________
   FATHER'S NAME
   ____________________________
   MOTHER'S NAME
   ____________________________
   Please describe the source:

8c. SPONSORS
   Money available from sources other than parents.
   ____________________________
   SPONSOR'S NAME
   ____________________________
   SPONSOR'S NAME
   ____________________________
   Please describe the source:

8d. YOUR GOVERNMENT
   NAME OF AGENCY
   ____________________________
   Enclose with this form a signed copy of your letter of award.

   TOTAL  $  $  $  $

10. What is the present exchange rate of your country's currency to the US dollar (for example, 3100 pesos = $1)  ____________________________  = $1
11. Does your government currently impose restrictions on exchange and release of funds for study in the U.S. [ ] Yes [ ] No
   If Yes, describe restrictions.
   ____________________________

12. Do you have a source for emergency funds once you arrive in the U.S. [ ] Yes [ ] No
   If Yes, name source.
   ____________________________
   Amount available in US dollars $  ____________________________

18. A CERTIFICATE OF ELIGIBILITY (Form I-20 or IAP-66) will not be authorized until this form is completed and returned to the institution to which you are applying.
   The institution will attach a copy of this form to your CERTIFICATE OF ELIGIBILITY. Both the form and certificate must be shown to the U.S. Consul to obtain a visa.

9. OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS
   This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

   SIGNATURE OF BANK OFFICIAL
   ____________________________
   TITLE
   ____________________________
   NAME OF BANK
   ____________________________
   ADDRESS
   ____________________________
   DATE

   Parent's signature is required (see certification statement above).

   SIGNATURE OF PARENT
   ____________________________
   NAME
   ____________________________
   ADDRESS
   ____________________________
   DATE

   Sponsor's signature is required (see certification statement above).

   SIGNATURE OF SPONSOR
   ____________________________
   NAME
   ____________________________
   ADDRESS
   ____________________________
   RELATIONSHIP OF SPONSOR TO STUDENT
   ____________________________
   DATE

   Does the information on this form contain false, incorrect, or incomplete information?
   [ ] Yes [ ] No

   I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusal of or revoking admission.

   SIGNATURE OF STUDENT
   ____________________________
   DATE

FOR OFFICE USE ONLY

SIGNATURE OF COLLEGE OFFICIAL
___________________________
NAME OF INSTITUTION
___________________________
ADDRESS
___________________________
DATE

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