

## Declaration and Certification of Financial Support Intensive English Institute 2025-2026

ISU International Programs Office 921 S 8<sup>th</sup> Ave. STOP 8038 Pocatello, ID 83209-8038

| Part I. Student Personal Information  |   |  |  |   |   |
|---|---|--|--|---|---|
| Name (as in passport):Last (Surname/Family)   | First (Given)   | Middle   | Date of Birtl  | h:Month/Day/Ye  | ar  |
| Term of application to IEI (check one): Fal   | l 1 Fall 2 Spri   | ng 1 Spri  | ng 2 Summer  | Year:   |   |
| Student ID Number:Lev   | rel of study at ISU (cl   | heck one):   | IEI only IEI u   | ndergraduate  | IEI graduate  |
| SEVIS Transfers: Have you attended another acted at Idaho State University? Yes No  |   |  | us during the five morent institution:   |   |   |
| General Information: International students red<br>University must show evidence of sufficient fund<br>any dependents (spouse and/or children) who will<br>or delaying your anticipated start date, new finan<br>than six months. ISU has calculated the following<br>and may not include all costs for all situations. T | ds to support themsel<br>Il be accompanying to<br>acial documentation value official yearly esti- | ves financial<br>hem to the U<br>will be necess<br>mates of expe | ly during one full year<br>nited States. If you a<br>sary if your earlier fir<br>enses to study at the | ar of study, as we<br>are a student return<br>nancial document<br>IEI. These are on | Il as support<br>rning to the IEI<br>ation is older<br>ally estimates |
| Part II. Estimate of Student's Expense The <u>estimated</u> financial cost for one year (5 eight EACH YEAR IEI and Administrative Support Fees Room and Board Health Insurance Books & Supplies Total   |   |  | EI at Idaho State Univ   | versity is:   |   |
| <b>Dependents:</b> A spouse and children who will ho  | ld F-2 or J-2 visas re  | quire additio  | nal yearly funding at  | \$6,000 per deper   | ndent.  |
| 1. Estimated Expenses:  | Intensive Engli   | sh Institute (I  | EI): \$21,261.00   | =   | \$21,261.00   |
| 2. <b>Dependent Expenses:</b> If you will bring a sp  | oouse or children, add  | l \$6000 <b>mult</b>   | <b>ciplied by</b> the number   | r of dependents =   | \$  |
|   |   | Total Esti   | mate of Yearly Exp   | enses = \$  |   |
| Part III. Dependent Information Please list below any dependents (spouse and/or expression)   | children) holding or  | applying for   | an F-2 or J-2 visa wh  | no will accompan  | y you to the  |

## Last (Surname/Family) Name First (Given) Name(s) Date of Birth Country of Citizenship Relationship to Student

United States, and submit a copy of each dependent's passport identification page and/or birth certificate.

## Part IV. Financial Information

Bank Document Requirements: Any bank document(s) used to obtain an I-20 or DS-2019 must be dated within the past six months to be considered valid. The document(s) must be original (or a certified true copy of an original document) on bank letterhead and signed and/or stamped by a bank official. Photocopies, faxes, or scanned attachments are unacceptable. Evidence may include funds in cash accounts, savings accounts, and certificates of deposits. Evidence may not include anticipated income or funds from non-liquid assets such as property ownership or investments. Evidence may not include anticipated income or awards from ISU unless the student has a written offer of funding from ISU. All document(s) in another language must be accompanied by an official English translation. The document(s) should show the available funds in U.S. Dollars (USD) if possible.

| Sour | ce of Funds  | Amount in U.S Dollars |  |
|------|--|-----------------------|--|
| 1.   | Personal Funds (Enclose an official bank document meeting the above Bank Document Requirements)  | \$                    |  |
| 2.   | Family and/or Sponsor Funds (Complete Part V. of this form and enclose an official bank document meeting the above Bank Document Requirements)                               | \$                    |  |
| 3.   | Financial Aid from Sponsoring or Government Agency, Private Foundation or Other Agency (Enclose an official and original letter indicating amount and availability of funds) | \$                    |  |
| 4.   | Financial Support from Idaho State University (Enclose award letter from ISU entity)   | \$                    |  |
| 5.   | Other Funding (Please Specify)   | \$                    |  |
|      | Total Support for first year at ISU: (this number must match or exceed the Total Estimate of Yearly Expenses listed in Part II of this form)                                 | \$                    |  |

|  | Part V. Fami | ly/Spon | sor Cer | tification |
|--|--------------|---------|---------|------------|
|--|--------------|---------|---------|------------|

| If you have more than one sponsor, please have each sponsor con  | nplete a separate form.   |
|--|---|
| Student's Name:  | Student's Date of Birth: Month/Day/Year                                   |
|  | Month/Day/Year  |
| Name of Sponsor:   | Relationship to student:  |
| Address of Sponsor:  |   |
| Check level of guaranteed financial support  Total First Year Expenses*  |   |
| □ Other amount \$ U.S. Dollars (USI  | D)  |
| *Total first year expenses include the <b>Total Estimate of Yearly</b>   | Expenses listed in Part II of this form.                                  |
| This is to certify that I have agreed to provide funds for the a study at the IEI at Idaho State University. I understand that assistance to the applicant and that I am fully responsible for resources in the form of an official bank document accompan | providing the indicated funds above. The evidence of my                   |
| Signature of Sponsor   | Date  |
| Sample Following is an example of a bank letter that could be s  | Bank Letter submitted in support of personal, family, or sponsored funds: |
| Date Bank Address  |   |

## **Applicant Statement**

His/her account number is (Account Number).

To Whom It May Concern:

By signing my name to this form, I certify that the information I have given on this form is a correct statement of my arrangements for financing my studies at the IEI at Idaho State University. I am fully aware that any false statements may result in denial of my admission or cancellation of my registration after enrollment at the IEI at Idaho State University.

Sincerely.

(Signature of Bank Official)

(Bank Stamp or Seal)

(Name of Account Holder) has had an account at (Name of Financial Institution) since (Account Opening Date).

The current balance in the above account is (Balance in US Dollars) US Dollars.

The amount available for withdrawal is (Amount Available) US Dollars. The average balance for the last 90 days is (Average Balance) US Dollars.

| A 1: 42 G: 4          | D /  |  |
|-----------------------|------|--|
| Applicant's Signature | Date |  |