DECLARATION and CERTIFICATION of FINANCES for INTERNATIONAL ESL PROGRAM STUDENTS

ESL Program
Loyola University Chicago
1110 West Loyola Avenue
Chicago, IL 60626 U.S.A.
(773) 508-3880
esl@luc.edu

Your Name
Given Name: ___________________________________
Family Name: ___________________________________

Mailing Address and Telephone Number where documents should be sent:

____________________________________________________________________________
House Number and Street Name

City                              State/Province    Postal Code    Country
____________________________________________________________________________

City and Country of Birth:________________________________________

Country of Citizenship:___________________________________________

Date of Birth (Month, Day, Year):__________________________________

Email address: __________________________________________________

Telephone Number:______________________________________________

FAX Number:____________________________________________________

Permanent Home Country Address:

____________________________________________________________________________
House Number and Street Name

City                              State/Province    Postal Code    Country
Applicants must submit evidence of adequate financial support to cover the cost of attendance for their entire time of study at Loyola.

*If you are sponsored by a government, educational institution, or official agency, please submit an official letter reflecting that the scholarship is valid for study at Loyola University Chicago.

Expenses for 2014-2015 Program

<table>
<thead>
<tr>
<th>Program</th>
<th>Summer 2015</th>
<th>Summer B 2014</th>
<th>Fall 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition &amp; Fees</td>
<td>$5820</td>
<td>$2920</td>
<td>$6325</td>
</tr>
<tr>
<td>Living expenses</td>
<td>$6000</td>
<td>$3000</td>
<td>$8000</td>
</tr>
<tr>
<td>U-Pass: NA</td>
<td>NA</td>
<td>NA</td>
<td>$137</td>
</tr>
<tr>
<td>TOTAL: $11820</td>
<td>TOTAL: $5920</td>
<td>TOTAL: $14462</td>
<td></td>
</tr>
</tbody>
</table>

AFFIDAVIT OF SUPPORT

*An original bank statement in U.S. currency, less than 6 months old, must accompany this form.

I guarantee that I will be fully responsible for all educational expenses incurred by the applicant named below during the course of study at Loyola University Chicago.

________________________
Signature of Applicant (if self-funded)    Date

Sponsor Information

Sponsor’s Given Names____________________ Sponsor’s Family Name____________________

Sponsor’s Relationship to Applicant________________________

________________________
Signature of Sponsor    Date