DECLARATION AND CERTIFICATION OF FINANCES

International Undergraduate Students must complete this form before Loyola University Chicago can issue a certificate of eligibility (Form I-20 for the F-1 student visa). If you have any questions about the I-20 or student visa process, please contact Loyola's Office for International Programs at iss@luc.edu (773) 508-3899.

Please return this form and appropriate documentation to:

Undergraduate Admission Loyola University Chicago 1032 W. Sheridan Road Chicago, IL 60660 U.S.A.

This form must be submitted along with a copy of your passport identification page.

Family Name		Given Name				
Talling Name		Orven Name				
Mailing Address and	telephone number whe	re documents should be	e sent:			
Number and Street:		<u></u>				
City	State/Province	Postal Code	Country			
City and Country of E	Birth:					
Country of Citizenshi	p:					
Date of Birth (Month, Day, Year):						
		_				
E-mail address		Telephone Nur	nber			
Permanent Home Cou	intry Address:					
	•					
Number and Street						
City	Province/State	Postal Code	Country			
If you are already in the United States, what is your current non-immigrant status? (i.e., B-1/2, F-1, F-2, J-1, J-2, H-1B, H-4):						
Change of Status with the	r status to F-1 student using USCIS after receiving the I lation about the Change of S	Loyola I-20. Please contact	the office for International			
	nr record in SEVIS to Loyol ed from your current school		you will need to request			
Please indicate the name of the school you are transferring from						

Applicants must submit evidence of adequate financial support to the cover cost of attendance for at least one academic year of studies at Loyola with the expectation that funding will be available for the entire program of study.

The amounts provided below are estimates only and pertain to the minimum enrollment required to maintain F-1 status for one academic year. For specific tuition and fees information, please consult the Office of the Bursar www.luc.edu/bursar.

If supported by personal and/or family funds, submit the signed affidavit of support (below). Applications must include proof of funding dated within the last six months, reflecting a balance availability to cover the total amount listed below as well as expenses of any accompanying dependents.

If sponsored by government, educational institution, or official agency, please submit an official letter reflecting that the scholarship is valid at Loyola.

Expense estimate for 2017-2018 academic year

AFFIDAVIT OF SUPPORT							
C	J 1	onal expenses incurred by t	he applicant named below during				
the course of study at Loyol	a University Chicago						
Signature of Applicant (if self-funded)		Date					
Sponsor's Family Name	Given Name	Middle Name	Relationship to applicant				
Current mailing address (nu	mber and street)						
City	State/Country	Zip Code/Pos	stal Code				
I am willing to sponsor the a	above applicant in the amoun	t of per aca	demic year				

Dependent Information: Accompanying Spouse and Children

Tuition and fees \$43,438 Living expenses \$16,610

Total................\$60,048

Signature of sponsor

If you plan to bring a spouse and/or children with you, please provide additional proof of funding. To include a spouse, you must provide additional proof in the amount of \$5,900. Each child requires additional proof in the amount of \$4,100. Please include dependent information below and include copy of passport identity pages.

Date

	Last name (family name)	First Name	Date of birth Month/day/year	Country and city of birth	County of Citizenship	Gender M/F
Spouse						
Child						
Child						
Child						