



UNDERGRADUATE CERTIFICATE OF FINANCIAL RESPONSIBILITY

U.S. Immigration regulations require La Salle University to certify on form I-20 that students applying for non-immigrant student visas have provided evidence of their financial support for the duration of their student status. All sections must be completed. A recent original bank statement or document DATED WITHIN FIVE (5) MONTHS FROM TODAY'S DATE from a bank official verifying funds must accompany this form. Faxed forms will not be accepted.

Section A: Demographical Information Please print or type information exactly as it appears on your passport

Surname/Family Name	First Name	Middle Name
Number and Street Address		
City	State/Province	Country
Email	Telephone	Postal Code
US Address (if already living in the US)		

Gender: Male Female Birth date: (month/day/year) _____
 Country of Birth _____ Country of Citizenship _____

Will anyone be traveling to La Salle with you and *staying for the duration of your studies*? Yes No

If you will be traveling with someone, please list them (only spouses and children can be listed):

Family Name	First Name	Date of Birth	Country of Birth	Relationship to you
_____	_____	_____	_____	_____
Family Name	First Name	Date of Birth	Country of Birth	Relationship to you
_____	_____	_____	_____	_____
Family Name	First Name	Date of Birth	Country of Birth	Relationship to you
_____	_____	_____	_____	_____

Section B: 2010 - 2011 Tuition¹

Living on-campus

Living off-campus

TUITION	\$33,500 per year
FEES	\$420 per year
MANDATORY HEALTH INSURANCE	\$1,000 per year
BOOKS	\$1,000 per year
If you will live on-campus ²	add \$11,000 for housing, meal plan, fees, & living expenses
TOTAL	\$46,920

TUITION	\$33,500 per year
FEES	\$350 per year
MANDATORY HEALTH INSURANCE	\$1,000 per year
BOOKS	\$1,000 per year
If you will live off-campus	add \$11,000 for living expenses
TOTAL	\$46,850

Section C: Source of Financial Support ALL AMOUNTS MUST BE IN UNITED STATES DOLLARS

Student's Personal Funds \$ _____
 Funds from Parents/Guardians \$ _____
 Funds from Another Source \$ _____
 Name and relationship of source _____
Total amount available \$ _____

¹ For nursing programs, there will be additional costs depending on your course schedule. Please see your tuition statement for further information.
² Based on double-room occupancy and 14 Meal Plan Plus \$250 flex; actual cost may be higher

Section D: Certification of Funds

Student's Certification: (to be completed only if you are providing your own funds for your tuition)

I, _____, certify that the information provided is accurate and that these funds can be documented and are available for the first academic year in the US. I understand that if my source of funding changes at any time during my enrollment at La Salle University I am responsible for informing the Multicultural and International Center.

Signature: _____

Sponsor's Certification (to be completed by all sponsors – parents, government sponsors, or other sources)

Relationship to Applicant _____

Sponsor's Family Name _____ Sponsor's First Name _____

Number and Street Address _____ Telephone _____

City _____ State/Province _____

Country _____ Postal Code _____

I/We, _____ certify that I am/we are (name of student) _____'s financial sponsor and that the financial information on this form is true and accurate. I guarantee that the funds stated here are available and will be provided to the student for his/her study at La Salle University.

Signature _____

Certification of Student/Sponsor by Bank

Name of Bank _____

Bank Official's Family Name _____ First Name _____

Number and Street Address of Bank _____ Bank Telephone _____

City _____ State/Province _____

Country _____ Postal Code _____

I, _____, certify that the person guaranteeing funds for (name of student) _____ has been a client at this bank/financial institution since (date) _____, and to the best of my knowledge has the resources to provide the funds specified in this form, and that these funds are available for use by the student/sponsor.

Signature _____

Please send this completed form to:

Bob Arcangel
Coordinator of International Admission
La Salle University
1900 West Olney Avenue
Philadelphia, PA 19141
U.S.A.