



# STATEMENT OF FINANCIAL SUPPORT

## INSTRUCTIONS

International undergraduate applicants seeking to apply for an F-1 student visa or maintain F-1 student visa status must submit proof of adequate financial support to cover the cost of attendance for at least one academic year at the University of Houston (UH). To receive the Form I-20 from UH, the student must submit the Statement of Financial Support and supporting bank statements/financial documents.

1. Complete the Statement of Financial Support with required sponsor signatures. This form can be copied and used for multiple sponsors as necessary.
2. The completed form should be uploaded as a PDF file to your To Do List in your [my.uh.edu](http://my.uh.edu) self-service portal. Documents with multiple pages should be combined to a single PDF file first before uploading.

## ESTIMATED COSTS

The costs outlined below are an **ESTIMATE** of minimum expenses of tuition, required fees (including health insurance), living expenses, and books for one academic year (Aug-May) at the University of Houston. These estimates cover the fall and spring semesters only. Any summer studies will require additional tuition fees and living expenses. **NOTE: Tuition and fees are subject to change without notice. If you have two sponsor's the form will need to be submitted for each person.**

Estimated Undergraduate Costs Per Academic Year (9 Months)		Estimated Additional Costs Per Academic Year	
Non-Resident Tuition and Required Fees (24 Credits)	\$26,910	Cost per dependent	\$5,075
Living Expenses	\$15,060	Total Cost with one (1) dependent	\$48,145
Books	\$1,100	Total Cost with two (2) dependents	\$53,220
<b>TOTAL Minimum Estimate (Shown on I-20)</b>	<b>\$43,070</b>	Total Cost with three (3) dependents	\$58,295

## STUDENT INFORMATION *Completed by Student.*

Name (as it appears on passport): \_\_\_\_\_  
 Family Name/Surname \_\_\_\_\_ Given Names (First and Middle Names) \_\_\_\_\_

UH ID: \_\_\_\_\_ Date of Birth (month/date/year): \_\_\_\_\_ Citizenship: \_\_\_\_\_

Application Term: \_\_\_\_\_

Are you currently in the U.S. on a visa?  Yes  No If yes, what type of visa do you have? \_\_\_\_\_

Do you plan to come with dependents (spouse/children)?  Yes  No If yes, indicate number of dependents: \_\_\_\_\_

If you plan to bring a spouse and/or children with you to the U.S. in F-2 (dependent) status, please complete Part 3 Dependent Information and attach copies of passport ID pages for all dependents.

## SPONSOR INFORMATION *Completed by each Sponsor (self, family, friends, etc.). Make additional copies if necessary.*

Please identify who will sponsor you and the amount you expect to receive from each sponsor. In addition to the completed Statement of Financial Support, each individual sponsor and/or self-sponsoring student must submit supporting bank statements/financial documents verifying availability of funds pledged in sponsorship. Bank statement/letter must be issued by bank within the last six months and must include, bank name and address, account holder's name (matching name of sponsor), account type, available funds, and type of currency.

Funding Sources (select all that apply)	Required Documentation	Amount US Dollars (USD)
<input type="checkbox"/> Personal Funds (self-supporting)	<ul style="list-style-type: none"> <li>Completed and signed Statement of Financial Support (yourself as a sponsor)</li> <li>Copy of Bank Statement or Bank Letter</li> </ul>	\$
<input type="checkbox"/> Family/Relative/Friend Sponsor(s)	<ul style="list-style-type: none"> <li>Completed and sponsor signed Statement of Financial Support</li> <li>Copy of Bank Statement or Bank Letter</li> </ul>	\$
<input type="checkbox"/> Government/Employer/Sponsoring Institution	<ul style="list-style-type: none"> <li>Copy of official award letter or scholarship letter, with details of award from authorized agent/institution.</li> </ul>	\$

**IMPORTANT:** Though you will submit only electronic copies (PDFs) of your documents to UH, you should keep original bank statement/letters, sponsor letters, award letters (with original signatures) and any other original documentation to present at the visa interview at the U.S. embassy or consulate and/or to entry in to the U.S.

## SPONSOR STATEMENT OF SUPPORT To be signed by Sponsor.

*This is to certify that I, the sponsor \_\_\_\_\_ am willing and able to provide funds in the amount of no less than USD \$: \_\_\_\_\_ in support of \_\_\_\_\_ for their tuition, fees, health insurance, and living expenses per academic year (9 months) at the University of Houston and have provided documentation that these funds are available. As well, I understand that the estimated cost of attendance at UH is subject to increase without prior notice.*

Sponsor Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_  
Family Name/Surname Given Name

Sponsor Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Sponsor: \_\_\_\_\_ Today's Date: \_\_\_\_\_

## STUDENT CERTIFICATION To be signed by Student.

*This is to certify that the statements given by me in this form are complete and accurate. Furthermore, should my source of funding, as specified above, be interrupted or stopped. I understand that I remain responsible for all financial obligations.*

Signature of Student: \_\_\_\_\_ Today's Date: \_\_\_\_\_

## DEPENDENT INFORMATION

Please complete the following section to obtain an I-20 or DS-2019 form to bring your **spouse and/or dependent children** to the U.S.. Parents or other relatives are NOT eligible. Dependent children must be unmarried and under 21 years of age. You must demonstrate the ability to support your dependents by **providing proof of additional funding (\$41,850 + \$5,075 for spouse and/or each child)** in addition to the funds used to cover your tuition, fees, and living expenses. This amount must be shown regardless of the length of time your dependent(s) will stay in the US.

### DEPENDENT 1:

Family Name (Surname): \_\_\_\_\_ First Name (Given Name): \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Gender:  Female  Male Relationship:  Spouse  Child

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

### DEPENDENT 2:

Family Name (Surname): \_\_\_\_\_ First Name (Given Name): \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Gender:  Female  Male Relationship:  Spouse  Child

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

### DEPENDENT 3:

Family Name (Surname): \_\_\_\_\_ First Name (Given Name): \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Gender:  Female  Male Relationship:  Spouse  Child

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

