

## 2020-2021 International Student Certification of Finances Guidelines College of Osteopathic Medicine Admissions

*Please read prior to completing this form.*

The purpose of the Certification of Finances is to help William Carey University obtain complete and accurate information about the funds available to international applicants who wish to study in the United States. Strict governmental regulations, rising educational costs, and economic conditions have made verification of financial resources of international applicants essential. Institutions do not have the option of deciding whether or not to verify the financial resources of their international applicants; financial verification must be made prior to institutional issuance of Certificate of Eligibility (Form I-20).

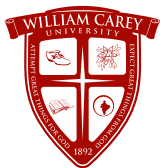
Currently the yearly cost of attending William Carey University is US\$56,000. International applicants should list enough financial resources on the Certification of Finances to pay the balance for each year they plan to attend William Carey University.

This form is designed to standardize financial information provided by applicants to William Carey University. By completing and returning this form, an applicant, if admitted, may obtain a Certificate of Eligibility (Form I-20).

Return this form directly to:

Office of International  
Admissions, Campus Box 150  
William Carey University  
710 William Carey Parkway  
Hattiesburg, MS 39401

[bdillon@wmcarey.edu](mailto:bdillon@wmcarey.edu)



# William Carey University

## INTERNATIONAL STUDENT CERTIFICATION OF FINANCES 2020-2021

**CONFIDENTIAL**

<p>1. YOUR NAME _____          Mr. _____          Ms. _____          Mrs. _____          Miss _____          LAST NAME FIRST NAME MIDDLE INITIAL</p> <p>2. PERMANENT ADDRESS _____          _____          _____</p> <p>3. MAILING ADDRESS _____          (If different from above) _____          _____</p>	<p>4. DATE OF BIRTH</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">MONTH</td> <td style="width:33%;">DAY</td> <td style="width:33%;">YEAR</td> </tr> </table> <p>5. COUNTRY OF BIRTH _____</p> <p>6. COUNTRY OF CITIZENSHIP _____</p>	MONTH	DAY	YEAR
MONTH	DAY	YEAR		

7. Enter the total amount of annual support from the sources listed below. Amounts must be entered in <u>U.S. dollars</u> . Please PRINT all entries. Use additional sheets of paper for explanations, if necessary.					<b>8. OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS</b> This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated. ( <u>Use official institutional seal or stamp to authenticate signature.</u> )				
STUDENT'S SOURCES OF FUNDS	ASSURED SUPPORT	PROJECTED SUPPORT							
	2020-2021	2021-2022	2022-2023	2023-2024					
<b>7a. PERSONAL OR FAMILY SAVINGS</b>  _____ NAME OF BANK  An official bank letter must be furnished to verify total availability of these funds.					SIGNATURE OF BANK OFFICIAL _____  TITLE _____  NAME OF BANK _____  ADDRESS OF BANK _____  _____ DATE _____				
<b>7b. PARENTS</b>  Money available from sources other than savings  _____ FATHER'S NAME  _____ MOTHER'S NAME  An official bank letter must be furnished to verify total availability of these funds.					<b>Parent's signature is required</b> (see certification statement above).  SIGNATURE OF PARENT _____  ADDRESS _____  _____ DATE _____				
<b>7c. SPONSORS</b>  Money available from sources other than parents  _____ SPONSOR'S NAME  _____ SPONSOR'S NAME  An official bank letter must be furnished to verify total availability of these funds.					<b>Sponsor's signature is required</b> (see certification statement above).  SIGNATURE OF SPONSOR _____  ADDRESS _____  _____ DATE _____  RELATIONSHIP OF SPONSOR TO STUDENT _____				

9. What is the present exchange rate of your country's currency to the U.S. dollar (for example, 3,100 pesos = \$1)? . . . . . \_\_\_\_\_ = \$1

10. Does your government currently impose restrictions on exchange and release of funds for study in the U.S.?  Yes  No  
**If YES, describe restrictions** \_\_\_\_\_  
 \_\_\_\_\_

11. A CERTIFICATE OF ELIGIBILITY (Form I-20) will not be authorized until this form is completed in full and returned to William Carey University.

I certify that the information on this form is true, correct, and fully complete. I understand that any misrepresentation may be cause for refusing or revoking admission to William Carey University.

SIGNATURE OF STUDENT \_\_\_\_\_ DATE \_\_\_\_\_  
Month Day Year