

## FINANCIAL AFFIDAVIT FOR INTERNATIONAL STUDENTS

An international applicant accepted for admission to a graduate program at Pace University who requires a Certificate of Eligibility for a student visa **must** submit the International Applicant Financial Affidavit below. The completed affidavit must be submitted with a letter from a bank indicating the availability of sufficient funds in US dollars available for one year of study. Applicants are advised to obtain two sets of bank documentation in order to have one set for the embassy use.

If any financial support is to be provided by one or more sponsors, the Sponsor(s) Affidavit(s) of Support must also be submitted and the sponsor(s) must provide the required bank documentation. (*Note: The Sponsor* 

(insert amount from below)

Pace University
Graduate Admission Office, W110
Graduate Application Processing Center
One Pace Plaza
New York, NY 10038
(212) 346-1531
graduateadmission@pace.edu

Affidavit of Support which follows this page may be reproduced.)

I certify that I have \_\_\_\_\_\_ US dollars available to me for the following expenses of my graduate education at Pace University.

I have indicated the source of my financial support below and have attached original bank documentation in US dollars. The information I have provided on this affidavit is correct and complete. I know that giving false information on this affidavit or in support documentation may result in the cancellation of my admission to Pace University. I also understand that the entire tuition and general institution fee is due at the time of registration for each term, that the insurance cost is an annual fee, and that costs may rise in succeeding terms. I also understand that if I am required to enroll for English language coursework, additional costs will ensue.

## COLLEGE OF HEALTH PROFESSIONS Accelerated Bachelor of Science in Nursing Degree-ABSN (ONE-YEAR PROGRAM) 2018–2019 Total Estimated Expenses for the Fall and Spring Terms

			<b>US Dollars</b> (self or sponsor**)		<b>Source of Support</b> (self, sponsor**, or scholarship)			
	Tuition	\$	;	38,668.00				
	Fees	\$	<u>;</u>	990.00				
	Housing	\$	<u>;</u>	19,000.00				
	Health Insurance	\$	ò	1,345.00				
	Other (books, personal expenses, and transportation)			2,780.00				
	Total:	\$	5	62,783.00				
	If you have been awarded a merit scholarship, you may deduct the amount here:							
	Total: \$							
		/						
Signature	Month Day	Y	'ear	Print Nan	ne			
Print Address								

<sup>\*</sup> Subject to change.

<sup>\*\*</sup>Each sponsor must complete an affidavit of support (see reverse side) and submit official bank documentation verifying availability of funds.



## COLLEGE OF HEALTH PROFESSIONS ACCELERATED BACHELOR OF SCIENCE IN NURSING DEGREE (ABSN) SPONSOR AFFIDAVIT OF SUPPORT

## TO BE COMPLETED BY SPONSOR 1

I certify that I am willing and able to sponsor						
				(insert student name)		
with the minimum amount of	he minimum amount of US dollars for her/his graduate tuition and living expenses while attending (insert amount)					
	cumentat	tion in U	S dollars	dated and signed by a bank official no more than six		
Signature	Month /	Day	_/	Relationship to Student		
Signature	MOILLI	Day	Teal	Relationship to Student		
Print Name		Sponsor	Citizenshi	)		
Print Address				Telephone Number		
Fax Number E-mail						
SPONSO	)R AFI	FIDAV	IT OF	SUPPORT		
TO BE COMPLETED BY SPONSOR 2						
I certify that I am willing and able to sponsor						
,				(insert student name)		
with the minimum amount of(insert amount)	US do	ollars for	her/his g	raduate tuition and living expenses while attending		
Pace University. I have attached original bank do months before the student's enrollment at Pace U				dated and signed by a bank official no more than six s account funds sufficient to sponsor the student.		
	/		_/	Relationship to Student		
Signature	Month	Day	Year	Relationship to Student		
Print Name		Sponsor	Citizenshi	0		
Print Address				Telephone Number		
Fax Number E-mail						
SPONSO	)R AFI	FIDAV	IT OF	SUPPORT		
TO BE COMPLETED BY SPONSOR 3						
I certify that I am willing and able to sponsor						
,				(insert student name)		
with the minimum amount of(insert amount)				raduate tuition and living expenses while attending		
Pace University. I have attached original bank do months before the student's enrollment at Pace U				dated and signed by a bank official no more than six account funds sufficient to sponsor the student.		
Signature	/	Day	_/ Year	Relationship to Student		
Print Name		Sponsor	Citizenship	0		
Print Address				Telephone Number		
Fax Number E-mail						