

INTERNATIONAL STUDENT CERTIFICATION OF FINANCES

This information will be provided to the U.S. government

SECTION A

1. Name									
Family/Surname	First/Given Name	Middle Name							
2. Date of Birth/									
Month Day Ye	ear								
3. Permanent Foreign Address									
Address									
GU.									
City									
Province/Territory		_ Postal Code							
Country									
Phone Number + () - ()								
Country Code Numb									
4. City and Country of Birth									
5. Country of Citizenship 6. E-mail Address									
Please provide a copy of the photo pa	ge of your valid passport. Your p	passport must be valid for							
more than six months after the start of	date of classes.								
Are you currently in the United States	or currently hold a valid U.S. Vi	sa (other than a B visa)?							
☐ Yes, go to Section B									
□ No, go to Section C									
SECTION B									
If currently in the United States, or currently hold a a valid U.S. Visa (other than a B visa), list your									
address within the United States.									
Address									
11441 000									
City									
State									
Postal Code									
U.S. Phone Number()									

Please provide a copy of your U.S. Visa stamp, if available.

SECTION C

In addition to any aid awarded by St. John's College, do you have financial support from someone other than yourself?

Joine Girier triair y Caroon.									
■ NO-If you are paying your expenses in ful or letter(s) from your bank showing the liq section and go to the last question on this	quid asse			_	_				sponsor
☐ YES —If you have a sponsor (or multiple sp form below:	onsors),	please have	e your sp	onsor	provide the	followin	g infor	mation in t	he
Name of Sponsor #1									
Relationship to Student									
Address of Sponsor									
Date									
Assured Support from Sponsor (in US dollars) 2024-25		2025-26	Pro	ojecte	d Support 2026-27			2027-28	
\$USD	\$		USD	\$		_USD	\$		USD
Please provide an official bank statemer listed above, in liquid assets. I (name of student) for the amounts listed above, the available and will be provided as indicated.	name of	Esponsor) ce	ertify tha	ıt I wil	l sponsor —				
Sponsor #1 Signature	Signature Date								
Name of Sponsor #2									
Relationship to Student									
Address of Sponsor									
Date									
Assured Support from Sponsor (in US dollars)				niecte	d Support	(in US do	llare)		
2024-25		2025-26		Jeeve				2027-28	
\$USD	\$		USD	\$		USD	\$		USD
Please provide an official bank stateme	nt or le	etter from	ı vour l	bank	showing	a mini	mum	of the a	mount
listed above, in liquid assets.			,		3				
I(name of	sponsor) ce	rtify tha	ıt I wil	l sponsor				
(name of student) for the amounts listed above, the available and will be provided as indicated.	at the b	ank statem	ent provi	ided is	true and ac	curate, a	nd tha	at the funds	are
Sponsor #2 Signature	Date								
Are you currently enrolled, or have been 5 months? If YES, please SUBMIT A COPY OF									
II 1110, please bobbill A COF I OF			11 1-20	anu		in tille I.		ansier r	OI III
SIGNATURE									

A certification of Eligibility Form (Form I-20) will not be authorized until this form is completed and returned to St. John's College. I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.

Signature	Date