## **Request for DS2019 & Declaration of Finances**

Please check the box below t Norwich University. NOTE: Students should also budget	: All students pay the inte	rnational activity fee, bo	oks, and health insurance costs.
☐ Tuition is waived. ☐ Tu	ition and Room costs are	waived.   Tuition, Ro	om & Board costs are waived.
Surname/ Last Name		Given/ First Name	
Foreign Address:		Foreign City:	
Foreign Country:		Foreign Phone Number:	
Address to Send DS2019 to	if different than above:	Name and Address of	f Sponsor (if applicable):
To determine your cost of attendance, refer to the "Current Cost of Attendance for Norwich University" found in your International Center application. Enter the values below and provide a total.		Please declare the amount of funds available for each category below. The total must be equal or greater than the total estimated cost of attendance.  Personal Funds US \$	
Tuition	\$ waived	Family Funds	US \$
Room Board	\$	Sponsor Funds	US \$
Fees Medical Insurance	\$		
Books	\$	Total Funds	US \$
Total (cost of attendance)	\$		
honestly declared the amoun	t and sources of funds we bay may result in involunt	have readily available for ary withdrawal from the	ndance and have truthfully and or the duration of studies. We university and this action may
Applicant's Signature	Date	Sponsor's Signature	Date