

## F-1 International Student Certification of Finances

This original, confidential financial certification form must be completed and submitted along with supporting financial documents before a Form I-20 can be issued. Please review page 2 of this form prior to completion. If you have any questions about completing this form contact Cleveland State Global at admissions@clevelandstateglobal.org.

## **2023-24 ESTIMATED EXPENSES**

Below are the 2023-24 estimated annual expenses for international students. Your supporting financial documents must total the costs of tuition, living expenses, and health insurance for your undergraduate program. See table below. If your spouse and/or children are accompanying you to the U.S., you must show an additional \$3,500 for your spouse and \$2,000 for the first child, and \$1,500 for each additional child.

YEAR ESTIMATED EXPENSES	INTERNATIONAL DIRECT	USTART	ACADEMIC ACCELERATOR	ACADEMIC ENGLISH
Tuition and Fees	\$20,652	\$23,652	\$23,152	\$12,200
Living Expenses	\$16,800	\$16,800	\$16,800	\$16,800
Other Personal Expenses and Insurance	\$7,893	\$7,893	\$7,893	\$7,893
Minimum Needed for Financial Certification	\$45,345	\$48,345	\$47,845	\$36,893

Due to rising costs, financial planning should allow for a 5 to 10 percent annual increase in living expenses and/or tuition.

STUDENT INFORMATION Student ID: 00445412	Visa Type (check one) ■ F-1 □ Other	
Surname(s) (as indicated on passport): Singh		
Given Name(s): Khushwinder	Suffix:	
Date of Birth (DD/MM/YYYY): 04-01-2000	E-mail: Khushwindersingh0070@outlook.com	
STUDENT ANNUAL FINANCIAL SUPPORT IN U.S	, ,	
A. Personal Savings		unt \$
B. 1. Family Funds (If full or partial financial support is	s from family/sponsor) Amou	unt \$ 30021
Print Name: Mohan Singh	Rela	tionship: Father
Address: H.no. 1487 Sainik Colony Po	O Babyal Ambala Cantt. Pin:133005, Haryana Inc	lia
2. Family/Sponsor Funds	Amoi	unt \$18012
Print Name: Manjit Kaur	Rela	tionship: Mother
Address: H.no. 1487 Sainik Colony PC	D Babyal Ambala Cantt. Pin:133005, Haryana Ind	a
C. Government/Other Organizational Sponsorship Funds	Amor	unt \$
Print Name of Agency:		
I have applied for/been awarded	□т	uition Scholarship
Applicant's Signature	Date	09-11-2023

## Cleveland State University – Cleveland State Global

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## SUPPORTING FINANCIAL DOCUMENTS

Enclosed with this form, you are required to submit valid supporting financial documents certifying that you have sufficient funds available to cover expenses for your first year at Cleveland State University. Documents must be original, dated no more than 6 months from the time of I-20 issuance, officially translated into English, and issued by a financial institution or agency verifying access to the funds. Please carefully review the following acceptable examples of financial documents.

- · Personal funds A recent bank letter or bank statement.
- Funds from family or sponsor Bank statement along with an affidavit of support containing both student's and sponsor's names, relationship, and amount of funds available for the purpose of the applicant's studies. You may use the bottom of this form for your affidavit of support. Funds must be shown at the current USD conversion rate.
- As an option, you may instead submit a bank letter on official letterhead containing the name of sponsor, relationship to the applicant, name of the applicant, and the U.S. dollar amount available for the purpose of the applicant's studies from a personal account.
- · Government or other sponsoring agency A signed copy of the scholarship or award letter stating the amount, name of recipient and duration of award.
- · Examples of financial documents that will not be accepted include:
  - Annual salary statement
  - Real estate
  - Investments, stocks, or other accounts from which money cannot be withdrawn
  - Family Business account

AFFIDAVIT OF SLIDDORT

I,	aur	, hereby certif	y that I am will	ing and able t	o provide U.S.\$
(Print Name of Famil to meet the expenses incurred	byKh	nushwinder Si		during the length of the student's academic study to which t	
application pertains. My relatio	,	,	Mother		
I have authorized the release o	f my supporting financ	ial documents to v	erify that the p	romised finan	cial resources are available to me.
I affirm that I know and unders	stand that the contents	s of this affidavit s	igned by me a	nd the statem	ents are true and correct
Signature of Sponsor/Family M	ember:			Date:	09-11-2023
Signature of Sponsor/Family M Signature of Sponsor/Family M					

Please make a copy of all paperwork for your records.