



Applicant's Name: \_\_\_\_\_

*You must certify that you will have funds available to cover your expenses for your first academic year (9 months) at Henderson State University. F1 students are not authorized to work off campus and on campus employment is limited to part-time during the academic year, so employment should not be considered a significant means of support while at Henderson.*

**SOURCES AND AMOUNTS OF FINANCIAL SUPPORT (Indicate amounts in U.S. dollars.)**

a. FROM SAVINGS OR PERSONAL FUNDS..... \$ \_\_\_\_\_

*(Send bank statement or letter signed by bank official. Statement or letter must be in English.)*

b. FROM FAMILY OR FRIENDS..... \$ \_\_\_\_\_

*(Complete Sponsor section below and send a bank statement showing the availability of funds.)*

c. FINANCIAL SUPPORT FROM GOVERNMENT AGENCY OR OTHER ORGANIZATION..... \$ \_\_\_\_\_

Name of sponsoring organization: \_\_\_\_\_

*(Send the original or official copy of your award, in English, as evidence of financial support.)*

d. FINANCIAL SUPPORT FROM HENDERSON STATE UNIVERSITY..... \$ \_\_\_\_\_

TOTAL SUPPORT FOR FIRST YEAR OF STUDY AT HENDERSON STATE UNIVERSITY..... \$ \_\_\_\_\_

*(Total must equal or exceed current estimated total expenses for one year of study)*

Please check the appropriate box:

I plan to come alone (F1).

I plan to bring the following dependents with me (F2 - include a copy of passport).

Family Name, First Name

Relationship

_____	_____
_____	_____
_____	_____

I plan to have my dependents come later.

***\*For dependents to be included on the I-20, include sources and amounts of income to total an additional \$6,186 per dependent.***

**IF STUDENT IS BEING SPONSORED (Parent/Family/Other)**

*This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.*

Sponsor's Name (printed) \_\_\_\_\_

Relationship of Sponsor to Applicant \_\_\_\_\_

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**STUDENT STATEMENT**

**I understand that tuition and fees are payable in full at the beginning of each semester. I certify that the above information provided is correct and complete and that I shall notify Henderson State University of any change to my financial circumstances.**

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_