

Financial Certificate

for International Students

Return to:

The George Washington University Office of Undergraduate Admissions Rice Hall, Suite 201 Washington, D.C. 20052 USA

Phone: (202) 994-6040 • Fax: (202) 994-0325 intadm@gwu.edu

Requiring Forms I-20 or DS-2019

This form is to be completed and submitted along with your other application materials. Your application will not be considered complete until this financial certificate is received.

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PLEASE NOTE: Applicants requiring an I-20 or DS-2019 must (1) copy of biographical page of passport; (2) copy of expiration			visa stamps, if any.
GWid (if known) G			
Name: (please print)	F	Full First Name/Given Name	Full Middle Name
Date of Birth Month Day Y	Year		
Country of Birth		Country of Citizenship	
Applying to which GW school			
What type of immigration document are you requesting from	ı GW? ☐ I∹	20 (F-1 Status) DS-2019	(J-1 Status)
Are you currently living in the U.S.? Yes No (If yes, attach a copy of your I-94 record.)			
Are you presently in F-1 or J-1 Status? Yes No (If yes, attach a copy of all pages of your I-20 or DS-2019.)			
You are required to certify that you have sufficient funds availal minimum funds needed. Please complete the chart on page to tuition will not increase but other expenses can be expected to	wo of this for	m with these amounts in mind	
Tuition and Fees*:	\$ 49,110		
Living Expenses:	\$ 11,700		
Books and Supplies:	\$ 1,275		
Personal Expenses:	\$ 1,465		
Health Insurance:	\$ 2,450		
TOTAL	\$ 66,000	(2014-2015 estimated exp	enses)
* Fees include a one-time only Matricu	ulation Fee of	⁵ \$350	
IMPORTANT: DOCUME Family Expenses: If you are married and plan to bring your spoand U.S. \$5,394/year for each child.		OVERING ADDITIONAL EXPE	
Summer Expenses will require approximately U.S. \$5,200 in ac	ddition to the	above, plus any summer tuiti	on and fees.
Employment Prohibitions: In computing your expenses, you sl cannot be authorized to work off campus to support themselve academic year or full-time during the summer, as a means of so	es. Therefore	, you should not anticipate em	
	T DEPENDEN	ITS WHO WILL ACCOMPANY	YOU
Please check where appropriate:			
I plan to come alone.			
I plan to bring dependents			

Attach a photocopy of the biographical/identification pages of passport for each dependent. On a separate sheet of paper, provide the following information for each dependent: family name, given name, gender, relation, date of birth, country of citizenship, city and country

of birth, and country of legal permanent residence.

Please complete the chart below, and include with this Financial Certificate Form all original supporting financial documents written in English. Projected support should increase by approximately 5% annually. Documents must be no more than three months old.

Amounts in U.S. Dollars

Source of Funds	Attach Documents	Projected Support (Increase by 5% annually)		
	Year 1 (enter amount)	Year 2 (enter amount)	Year 3 (enter amount)	Year 4 (enter amount)
Self-Support Enclose bank statement documenting sufficient cash for all years of study.	\$	\$	\$	\$
Parents or Individual Sponsors Your sponsor must sign the certification portion below and enclose a bank statement.	\$	\$	\$	\$
Your Government Enclose with this form a signed copy of your letter of award, specifying the current date, the name of the George Washington University, the U.S. dollar amount, the exact starting date and length of the scholarship, and conditions of the award.	\$	\$	\$	\$
	\$	\$	\$	\$
Other (Specify) Enclose with this form a signed affidavit from a person authorized to certify the accuracy of this entry.				
TOTAL: totals must equal or exceed GW estimate of expenses (\$66,000) for each calendar year you plan to attend.	\$	\$	\$	\$
(voo)eee, to eath anomali year year plan to allow a	(enter amount)	(enter amount)	(enter amount)	(enter amount)
Signature of Applicant			Date	
GWid (if known) G				
OFFICIAL CERTIFICATION guarantee that I will provide to the above-named applicant the amounded the George Washington University.	ount indicated on the	above chart, for pu		•
Sponsor's Signature			Date	
Sponsor's Name (please print)		Relationship	to Applicant	
f living in the U.S., please indicate: U.S. Citizen U.S. Perm	anent Resident	Other		
Sponsors who are living in the U.S. and are not citizens must provide the biographical page of their passport and the passport expiration	•	nigration papers (I-9	94 and visa stamps)	, as well as a copy o
Sponsor's Address				

This form will not be considered complete without the original signature of the sponsor and the sponsor's mailing address.