

CONFIDENTIAL FINANCIAL STATEMENT

International Student Office
The University of West Florida
11000 University Parkway
Pensacola, Florida 32514-5750

A student must provide proof of sufficient funds for academic and personal expenses, including health insurance, for the duration of program of studies. The student should examine carefully the list of estimated expenses included in the admission packet, to ensure sufficient funds are available. The Form I-20 or DS-2019 will be issued only after financial documents are received.

NAME: _____
(LAST/FAMILY/SURNAME) (FIRST) (MIDDLE) (Student ID 970#####)

Please note: Tuition is subject to annual increases.

Level of Study	Annual tuition	Living expenses & Books	Insurance	Total
Undergraduate	\$15,390	\$14,980	\$1129	\$31,499
Graduate	\$18,586	\$14,980	\$1129	\$34,695
Exchange	Covered under exchange program	\$7,833 (per semester)	\$463 (per semester)	\$8,296 (per semester)
Intensive English	\$3,450 (per semester)	\$4,200(per semester)	\$500 (per semester)	\$8,150 (per semester)

Indicate the source(s) of your financial support and amounts in **U.S. dollars** for each source. You must show funding for one academic year.

Source 1: _____ Amount of Support: _____

Source 2: _____ Amount of Support: _____

Source 3: _____ Amount of Support: _____

Sponsor Statement

I agree to sponsor _____ while he/she is studying at the University of West
(name of student)
Florida. I have sufficient funds to cover his/her tuition and living expenses while he/she is studying.

(Printed name of sponsor)

(Signature of sponsor)

(date)

Attach **originals** of all bank statements or letters, scholarship award letters, and other financial documents to this form. Documents must be less than six months old and must be in English or translated into English. Sign the form below and return it to the address listed at the top.

I certify that the above statements are complete and accurate.

(Signature of Student) (Date)