



FINANCIAL AFFIDAVIT FOR GLOBAL PATHWAY STUDENTS

2020–2021

Office of Graduate Admission

Pace University
 Graduate Admission Office
 Graduate Application Processing Center
 One Pace Plaza
 New York, NY 10038
 (212) 346-1531
 intlgradadmission@pace.edu

This Financial Affidavit for International Students is for use by Pace University international students who require a Certificate of Eligibility for a student visa. The completed affidavit **must be** submitted with a letter from a bank indicating the availability of sufficient funds in US dollars for one year of study.

Applicants are advised to obtain a second set of bank documents for use by the embassy issuing your student visa.

If financial support will be provided by one or more sponsors, please note that each sponsor must submit a separate Sponsor Affidavit of Support and bank documentation verifying the availability of funds. The Sponsor Affidavit of Support is on the reverse side of this page and may be reproduced.

I certify that I have _____ US dollars available to me for the following expenses of my graduate education at Pace University.

I have indicated the source of my financial support below and have attached original bank documentation in US dollars. The information I have provided on this affidavit is correct and complete. I know that giving false information on this affidavit or in support documentation may result in the cancellation of my admission to Pace University. I also understand that the entire tuition and general institution fee is due at the time of registration for each term, that the insurance cost is an annual fee, and that costs may rise in succeeding terms. I also understand that if I am required to enroll for English Language course-work, additional cost will ensue.

PACE UNIVERSITY GLOBAL PATHWAY (GP) Estimated Expenses for the 2020–2021 Academic Year

	Source of Support			
	US Dollars (self, sponsor, scholarship)			
Estimated Tuition 3, 2, or 1 Term(s) of GP	\$34,500	\$23,000	\$11,500	_____
Standard Fees †	\$990	\$990	\$990	_____
Health and Accident Insurance (12 months)	\$1,500	\$1,500	\$1,500	_____
Books / Supplies / Personal Expenses	\$2780	\$2780	\$2780	_____
Room and Board	\$19,500	\$19,500	\$19,500	_____
Total:	\$59,270	\$47,770	\$36,270	

 Student Signature Month/Day/Year Print Name

 Print Current Address

 Print Permanent Foreign Address

 Telephone Number Fax Number Email Address

† Standard fees include the General Institution fee, Student Activities fee, Technology fee, and Health Care Service fee.

This form may be reproduced.

Sponsor Affidavit of Support to be Completed by Sponsor 1

I certify that I am willing and able to sponsor: _____ with a minimum amount of _____
(Insert Applicant's Name) (Insert Amount)

in US dollars dated and signed by a bank official no more than six months before the applicant's expected enrollment at Pace University, indicating savings account funds sufficient to sponsor the applicant.

_____	_____/_____/_____ Month/Day/Year	_____
Signature		Relationship to Applicant
_____	_____	
Print Name	Sponsor Citizenship	
_____	_____	_____
Print Address	Telephone Number	Fax Number

Sponsor Affidavit of Support to be Completed by Sponsor 2

I certify that I am willing and able to sponsor: _____ with a minimum amount of _____
(Insert Applicant's Name) (Insert Amount)

in US dollars dated and signed by a bank official no more than six months before the applicant's expected enrollment at Pace University, indicating savings account funds sufficient to sponsor the applicant.

_____	_____/_____/_____ Month/Day/Year	_____
Signature		Relationship to Applicant
_____	_____	
Print Name	Sponsor Citizenship	
_____	_____	_____
Print Address	Telephone Number	Fax Number

Sponsor Affidavit of Support to be Completed by Sponsor 3

I certify that I am willing and able to sponsor: _____ with a minimum amount of _____
(Insert Applicant's Name) (Insert Amount)

in US dollars dated and signed by a bank official no more than six months before the applicant's expected enrollment at Pace University, indicating savings account funds sufficient to sponsor the applicant.

_____	_____/_____/_____ Month/Day/Year	_____
Signature		Relationship to Applicant
_____	_____	
Print Name	Sponsor Citizenship	
_____	_____	_____
Print Address	Telephone Number	Fax Number