

College of Health Professions

## FINANCIAL AFFIDAVIT FOR INTERNATIONAL STUDENTS

An international applicant accepted for admission to a graduate program at Pace University who requires a Certificate of Eligibility for a student visa must submit the International Applicant Financial Affidavit below. The completed affidavit must be submitted with a letter from a bank indicating the availability of sufficient funds in US dollars available for one year of study. Applicants are advised to obtain two sets of bank documentation in order to have one set for the embassy use.

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

If any financial support is to be provided by one or more sponsors, the Sponsor(s) Affidavit(s) of Support must also be submitted and the sponsor(s) must provide the required bank documentation. (Note: The Sponsor Affidavit of Support which follows this page may be reproduced.)

I certify that I have \_\_\_\_\_\_ US dollars available to me for the following expenses of my graduate education at Pace University. (insert amount from below)

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 coursework, additional costs will ensue.

## COLLEGE OF HEALTH PROFESSIONS PHD IN NURSING

## 2020-2021 Total Estimated Expenses for the Fall and Spring Terms\*

	US Dollars (self or sponsor**)	Source of Support (self, sponsor**, or scholarship)
Tuition	\$ 25,020.00	
Fees	\$ 1,080.00	
Housing	\$ 21,000.00	
Health Insurance	\$ 1,500.00	
Other (books, personal expenses, and transportation)	\$ 2,780.00	
Total:	\$ 51,380.00	

Total: \$

If you have been awarded a merit scholarship, you may deduct the amount here:

	/ /	
Signature	Month Day Year	Print Name
Print Address		
Telephone Fax	Email	

\*Subject to change.

\*\*Each sponsor must complete an Affidavit of Support (see reverse side) and submit official bank documentation verifying availability of funds.



This form may be reproduced.

## SPONSOR AFFIDAVIT OF SUPPORT

TO BE COMPLETED BY SPONSO	R 1				
I certify that I am willing and able t	o sponsor				
				(insert student name)	
with the minimum amount of (insert a	mount)	US o	dollars f	for her/his graduate tuition and living expenses while attending	
Pace University. I have attached o	riginal bank do			US dollars dated and signed by a bank official no more than six ting savings account funds sufficient to sponsor the student.	
Signature	Month	 Day	/ Year	/Relationship to Student	
Print Name		Sponsor	Citizens	hip	
Print Address				Telephone Number	
Fax Number	Email			—	
	SPONS	OR AF	FIDA	AVIT OF SUPPORT	
TO BE COMPLETED BY SPONSO	R 2				
I certify that I am willing and able t	o sponsor				
, ,				(insert student name)	
with the minimum amount of	mount	US dollars for her/his graduate tuition and living expenses while attending			
Pace University. I have attached o	riginal bank do			US dollars dated and signed by a bank official no more than six ting savings account funds sufficient to sponsor the student.	
Signature	Month	Day	/ Year	/Relationship to Student	
Print Name		Sponsor	Citizens	hip	
Print Address				Telephone Number	
Fax Number	Email			_	
Fax Nulliber				AVIT OF SUPPORT	
	SPONS		FIDF	AVII OF SUPPORT	
TO BE COMPLETED BY SPONSO	3				
I certify that I am willing and able t	o sponsor				
				(insert student name)	
	isert amount)	US o	dollars f	for her/his graduate tuition and living expenses while attending	
Pace University. I have attached o	riginal bank do			US dollars dated and signed by a bank official no more than six ting savings account funds sufficient to sponsor the student.	
Signature	Month		/ Year	/Relationship to Student	
5		,	-		
Print Name		Sponsor	Citizens	hip	
Print Address				Telephone Number	
Fax Number	Fmail				