

2019–2020 Financial Affidavit for Undergraduate International Students



Office of Undergraduate Admission

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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 undergraduate 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 UNDERGRADUATE STUDY Estimated Expenses for the 2019–2020 Academic Year

	US Dollars	Source of Support (self, sponsor, scholarship)
Estimated Tuition (24–36 credits)	\$44,000	_____
Standard Fees †	\$1,700	_____
Health and Accident Insurance (12 months)	\$1,400	_____
Books and Supplies	\$800	_____
Personal Expenses	\$1,600	_____
Room and Board	\$19,500	_____
Total:	\$69,000	
Pace Scholarship (subtracted from total)	–	
Total Expenses after Scholarship:	<input type="text"/>	<input type="text"/>

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.

2019–2020 Financial Affidavit for International Students



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.

_____ Signature	_____/_____/_____ Month/Day/Year	_____ 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.

_____ Signature	_____/_____/_____ Month/Day/Year	_____ 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.

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