



**Office of Admissions**  
 Oregon State University, 104 Kerr Administration Building, Corvallis, OR 97331, U.S.A.  
 Phone 541-737-4411 or inside US: 800-291-4192 Fax 541-737-2482 E [intladmit@oregonstate.edu](mailto:intladmit@oregonstate.edu)  
<http://oregonstate.edu/admissions>

## INTERNATIONAL UNDERGRADUATE STUDENT CERTIFICATION OF FINANCES FORM 2010-11

All international applicants to Oregon State University must complete this form and return it to the Office of Admissions (address above).

1. NAME (as shown on passport): \_\_\_\_\_  
Last (Family) First (Given) Middle (if any)

2. CURRENT MAILING ADDRESS: (address to which your OSU I-20 or DS-2019 will be sent) \_\_\_\_\_  
 \_\_\_\_\_

3. PERMANENT HOME COUNTRY ADDRESS (no PO Boxes please): \_\_\_\_\_  
 \_\_\_\_\_

4. PHONE (include country code): \_\_\_\_\_ 5. EMAIL: \_\_\_\_\_

6. DATE of BIRTH (MM/DD/YY): \_\_\_\_\_ 7. PLACE of BIRTH (city and country): \_\_\_\_\_

8. COUNTRY of CITIZENSHIP: \_\_\_\_\_ 9. COUNTRY of LEGAL PERMANENT RESIDENCE: \_\_\_\_\_

10. PROPOSED DEGREE (check):  Bachelor's  Post Baccalaureate

11. PROPOSED FIELD OF STUDY: \_\_\_\_\_

12. GENDER (check):  Male  Female 13. MARITAL STATUS (check):  Married  Single

14. WILL ANY OF YOUR DEPENDENTS (SPOUSE AND/OR CHILDREN) COME TO THE US WITH YOU? (check):  Yes  No

15. IF YES, PLEASE PROVIDE INFORMATION FOR EACH DEPENDENT (SPOUSE AND/OR CHILDREN):

Last / First / Middle Name	Relationship	Gender	City & Country of Birth	Country of Citizenship	Date of Birth (MM/DD/YY)

16. ARE YOU CURRENTLY IN THE UNITED STATES? (check):  Yes  No If you answered Yes, complete parts A,B and C  
If you answered No, please complete Parts D and E.

A. VISA CLASSIFICATION (Please attach a photocopy of your visa document):  
 Student (F-1)  
 Exchange Visitor/ Student (J-1)  
 Other, Please indicate visa type here: \_\_\_\_\_

B. NAME OF INSTITUTION YOU ARE ATTENDING IF YOU HOLD A STUDENT VISA: \_\_\_\_\_

C. IF YOU CURRENTLY HAVE A VISA, DO YOU WISH TO REMAIN IN THIS TYPE OF VISA STATUS:  Yes  No

D. PLEASE ATTACH A PHOTOCOPY OF YOUR PASSPORT IDENTIFICATION PAGE AND THE SAME FOR EACH DEPENDENT WHO WILL ACCOMPANY YOU.

E. WHAT VISA TYPE DO YOU EXPECT TO RECEIVE? (check):  Student (F-1)  Exchange Visitor/Student (J-1)

**APPLICANT NAME:** \_\_\_\_\_  
 LAST FIRST MIDDLE

**DECLARATION OF FINANCES**

If it is determined that you are admissible to Oregon State University, OSU can provide you with an I-20 (F-1) or DS-2019 (J-1) only after you submit satisfactory evidence that you have adequate funds for your proposed program of study. Acceptable financial documents must not have been issued (by the financial institution) more than nine (9) months before the term you intend to enroll at OSU and must accompany this form. Be sure to keep copies of these documents as you will need to present them to the U.S. Consular Officer at your visa interview and to the U.S. Immigration Officers at the Port of Entry. Please note: U.S. visa regulations restrict student employment, and therefore, it is important not to rely on employment for income to offset your educational expenses.

Estimated costs: These figures cover the cost of tuition, fees, and a modest estimate for room, board, books, supplies, health insurance (required of all international students and accompanying family members), and incidental expenses. Summer tuition and fees are not included in the estimates. Costs tend to increase slightly from year to year. To help you prepare financially, Bachelor's programs are 4-5 years in length. You and your sponsor must prepare to meet the ongoing costs of your educational and living expenses, not only for the first 12 months, but for the duration of your studies at OSU. For a comprehensive list of resource fees required by some majors, please visit: [http://oregonstate.edu/fa/businessaffairs/studentfinance/tuition/tuition\\_info](http://oregonstate.edu/fa/businessaffairs/studentfinance/tuition/tuition_info) (click on Resource Fees and year shown).

	<b>Undergraduate</b>	
Tuition (9 months)	\$19,100	→ Tuition for Business, Engineering and Honor's College is an additional \$336-\$780 per year.
Fees (9 months)	\$1,350	→ Additional resource fees may be required by some majors
Room/Board (12 months)	\$8,250	→ Based on a combined average of on-campus and off-campus living expenses
Incidentals (12 months)	\$2,550	
Books (9 months)	\$1,650	
Health Insurance (12 months)	\$1,160	
<b>TOTAL:</b>	<b>\$34,060</b>	

**Summer Tuition and Fees:** \$1,840  
**Additional Expenses:** First Dependent \$8,690 (12 months including health insurance), Additional Dependents \$3,830

**17. PLEASE DOCUMENT THE AMOUNT OF MONEY AND THE SOURCES OF YOUR FINANCIAL SUPPORT DURING YOUR PROGRAM OF STUDY AT OSU.**

Personal Savings	Original bank letter with date account opened, average and current balance. Letter may not be more than nine (9) months old before the term you intend to enroll at OSU.	\$ _____
Parent or Sponsor	Same as above plus the Affidavit of Support section completed below.	\$ _____
Salary While on Leave	Original, validated letter from employer	\$ _____
Government/Sponsoring Agency	Original or certified copy of award letter	\$ _____
Oregon State University	Copy of award letter or source of anticipated support	\$ _____

**AFFIDAVIT OF SUPPORT**

**To be completed by a parent, family guarantor, or applicant even if support is personal funds.**

I hereby certify that I am willing and able and that I do promise the amount of \$ \_\_\_\_\_ per year payable in U.S. dollars for educational expenses of (student's name) \_\_\_\_\_, who is my (relationship) \_\_\_\_\_ while at OSU. Documentation of my financial resources is attached to this affidavit of support.

Signature of Sponsor \_\_\_\_\_ Name of Sponsor (printed) \_\_\_\_\_

Address of Sponsor \_\_\_\_\_ Date \_\_\_\_\_

**18. CERTIFICATIONS AND SIGNATURES**

I certify that all statements on the Certification of Finances form are true and accurate information and that the stated funds are available for my education expenses at Oregon State University during the period specified. I will notify OSU of any changes in my financial circumstances. Furthermore, I understand that the information I have provided cannot be given to anyone except to me without my written permission.

Student Signature (required) \_\_\_\_\_ Date \_\_\_\_\_

Printed Student Name (required) \_\_\_\_\_

**RELEASE OF INFORMATION AUTHORIZATION STATEMENT**

(Optional) I authorize \_\_\_\_\_ to make inquiries on my behalf during the application process.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_