

## **COMMITMENT OF FINANCIAL BACKING (CFB)**

Instructions: If you plan to request a Certificate of Eligibility (Form I-20 or DS-2019) to apply for or maintain F-1 or J-1 status, you must submit the Commitment of Financial Backing (CFB) along with appropriate financial documentation and a copy of the biographical page of your passport. This form may be submitted at any point in the admissions process; however, the I-20/DS-2019 will not be issued until you have been admitted and submitted all required documents.

The amount of funding must cover the first year of expenses or \$41,500. This estimate reflects tuition and fees, as well as living expenses, for one academic year (summer registration excluded). Exact costs may vary. Tuition and fees are subject to change without notice. The bank statement or letter must be in English, on bank letterhead, show a minimum available balance of \$41,500, and be issued no earlier than 12 months prior to the start date of your academic program. Statements not in English should be submitted with an official, signed translation. If the balance is not listed in U.S. Dollars (USD), it should clearly indicate the currency used. If the bank account is not in the student's name, the sponsor must complete "Section 2: Sponsor Information." Scanned copies and faxes are acceptable, if legible. Submit this form and all supporting documents by email to: intladms@mountunion.edu, by fax to 330-823-5097, or by mail to: University of Mount Union, Admissions Office, 1972 Clark Ave, Alliance, OH 44601.

## **SECTION 1: STUDENT INFORMATION**

Family/Last Name	Given/First Name	Middle Name
Date of Birth (mm/dd/yyyy)	Gender (Male or Female)	City of Birth
Country of Birth	Country of Citizenship	Visa Expected (F-1 or J-1)
<u>*If F-1</u> : You will need to transfer yo		
will provide each year is \$ I will be supported by a sponsor. <i>You</i>	this time, I am submitting a copy of my own bank	and submit their financial documentation.
-	led by me on this form is correct and co f any changes in this information or in n	
Student's Signature	Printed Name	 Date

Office of International Admission



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## **SECTION 2: SPONSOR INFORMATION**

I certify that I am the finan relationship to the studen support in the amount of throughout the student's U.S. Citizens/Permanent R	t is (example: parent, USD \$ duration of study. I h	friend, employer) to cover the studen ave attached a copy of my	t's first year of study, y bank statement(s).	(student's name). My I will provide financial and my financial support will continue	
Sponsor's Family/Last Nar	ne	Sr	oonsor's Given/First N	ame	
Sponsor's Address Line 1					
Sponsor's Address Line 2					
City	State/Provir	nce	Postal Code	Country	
Sponsor's Signature		Printed Name		Date	
SECTION 3: DEPENDENT INFORMATION					
dependent's passport. Th	is will be used to issue dependent's passpor	e the I-20/DS-2019 for you	ur dependent(s). You	below as it appears on each must also submit a copy of the nust include an additional \$4,925 USD	
Family/Last Name	Given/First Name	Birth date (mm/dd/yyyy)	Country of Birth	Country of Citizenship Relationship	

Office of International Admission

1972 Clark Ave. • Alliance, OH, USA 44601-3993 • (330) 823-7493 • Fax (330) 823-5097 • intladms@mountunion.edu www.mountunion.edu