



# Financial Support Statement

The University of Central Arkansas (UCA) requires a confirmation of financial resources from each applicant. This statement must be on file before the successful applicant may receive a Form I-20 or DS-2019 required by the U.S. Consulates in order to obtain an F-1 or J-1 (student) visa. This form is valid for SIX MONTHS from the date of signature. The appropriate immigration document will be issued AFTER you have: 1) been officially admitted to UCA and 2) submitted this form along with a copy of the sponsor's bank statement, dated within the last six months, with a closing balance that demonstrates the guaranteed amount.

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Month/Day/Year)

Expected semester of enrollment (check one):  Fall  Spring  Summer Year \_\_\_\_\_

## Sources and Amounts of Financial Support

Indicate the amount from each source below in U.S. dollars:

**A. FROM SAVINGS OR PERSONAL FUNDS**..... \$ \_\_\_\_\_

(Submit a bank activity report or bank statement, dated within the last six months, with a closing balance that demonstrates the guaranteed amount)

**B. FROM FAMILY OR FRIENDS**..... \$ \_\_\_\_\_

(Submit a bank activity report or bank statement, dated within the last six months, with a closing balance that demonstrates the guaranteed amount)

**C. FINANCIAL SUPPORT FROM GOVERNMENT AGENCY, PRIVATE FOUNDATION, OR OTHER ORGANIZATION**..... \$ \_\_\_\_\_

Name of sponsoring organization: \_\_\_\_\_

(Submit the original form or official copy of your award as evidence of financial support. The statement of financial support must be in English.)

**D. FINANCIAL SUPPORT FROM UNIVERSITY OF CENTRAL ARKANSAS** ..... \$ \_\_\_\_\_

(Submit a copy of departmental award or Graduate Assistantship)

**E. I graduated from UCA and am or will become a member of the UCA Alumni Association**  Yes  No

(Submit proof of membership)

**TOTAL SUPPORT FOR FIRST YEAR OF STUDY AT THE UNIVERSITY OF CENTRAL ARKANSAS**..... \$ \_\_\_\_\_

(Total must equal or exceed current estimated total academic year expenses per our cost at <http://uca.edu/international/cost-of-attendance/>)

Please check the appropriate box:

I plan to come alone (F1).

I plan to bring the following dependents with me (F2 - include a copy of passport).

Family Name, First Name

Relationship

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I plan to have my dependents come later.

For dependents to be included on the I-20, add \$3,500 for first dependent and \$1,500 for each additional dependent.

### SPONSOR'S STATEMENT (Parent/Family/Other)

This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate and that the funds are available and will be provided as specified.

Sponsor's name (printed) \_\_\_\_\_

Relationship of Sponsor to Applicant \_\_\_\_\_

Sponsor's Signature \_\_\_\_\_ Date \_\_\_\_\_

### STUDENT STATEMENT

I understand that tuition and fees are payable in full at the beginning of each semester. I certify that the above information provided is correct and complete and that I shall notify UCA of any change to my financial circumstances.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please mail or email completed form to:**

International Admissions • University of Central Arkansas • 201 Donaghey Ave. • McCastlain Hall, Suite 109 • Conway, AR 72035

Phone: 501.450.3445 • Email: [oipadmission@uca.edu](mailto:oipadmission@uca.edu)