Financial Declaration 2018-2019 International Graduate Students

Master of Accounting

Jones Graduate School of Business

Rice University

Under U.S. law, the university must have certain information, including evidence of adequate financial resources, before issuing an I-20 form (for a student F-1 visa) or a DS-2019 (for an exchange visitor J-1 visa). Please complete this form and return it with the requested documentation when accepting Rice's offer of admission. Keep copies of all financial documents submitted, as you will need to present the same information to the U.S. consulate or embassy when obtaining a visa, and you may be requested to show it again when you pass through Immigration inspection coming into the U.S.

Name (as written on passport-a	ttach copy)			
、		Family	First	Middle
Date of Birth	Place of Birth			
Month/Day/Year		City		Country
Country of citizenship		_Country of legal per	manent residence	
Present occupation		Name of school or b	ousiness	
Email Address		Coming to th	e U S 🗖 Alone 🗖	With spouse \Box With children

Important Note: If you will be accompanied by dependents, please give their names, date of births, countries of birth, city of birth and countries of citizenship on page 2 of this form, so they can be issued appropriate documentation.

Tyme of yier desired.	E 1 Student Vice	I I Evolopeo Visitor Vise
Type of visa desired:	□ F-1 Student Visa	□ J-1 Exchange Visitor Visa
-)		

 \square I have \square I have not been enrolled previously in an educational institution in the U.S.

\$2.859

\$<u>2,925</u>

*\$80.501

Institution		Degree		
Date entered Estimate of expenses for one	Date departed e year at Rice, 2018-2019:	Still in U.S.?		
Tuition Academic Fees Additional Fees Computer/Software	\$53,000 \$583 \$894 \$2,000	<u>NOTE</u> : Tuition and Fees are estimates for the 2018-2019 academic year and are subject to change.		
Books/Supplies Room and Board Transportation Health Insurance	\$2,400 \$13,275 \$2,565 \$2,850	* If you are bringing dependents, you may wish to estimate an additional \$4000/dependent.		

Financial Resources:

Health Insurance

Personal

TOTAL

SOURCES OF FUNDING (fill in the table below with the amounts and provide the appropriate documentation of your financial resources to fund you for at least one year)	FUNDING AMOUNT
Rice Scholarship or Fellowship - attach letter of award	\$
Personal Funds – attach official bank statement(s)	\$
Family Funds – attach bank statement(s) <u>and</u> signed letter of support from family member that <u>includes</u> the sponsor's relationship to you (parent, brother, uncle, etc.)	\$
Personal Sponsor – attach bank statement(s) <u>and</u> signed letter of support from sponsor that <u>includes</u> the sponsor's relationship to you (family friend, employer, etc.)	\$
Other Source(s) – please specify source and attach proof of support	\$
	\$
	\$
TOTAL (must equal or exceed estimated expenses)	\$

I certify that the above information is correct, and I am supplying supporting documentation required by U.S. Immigration regulations in order to obtain an entry document. I understand that I am responsible for payment of tuition, fees, and health insurance, and that Rice University cannot be held responsible for unforseen difficulties that alter my financial situation.

Foreign Address: (This is your physical permanent address in your home country – no post office box or university address)

Street						
City	State/Province			Country		Postal Code
Mailing Address: (if different fro documents)	m address above	– please enter	the address wh	nere you would lik	te to receive you	r immigration
Street						
City	State/P	rovince		Country		Postal Code
Dependents information: (pleas to the U.S.)	e complete the fo	ollowing inform	nation for each	of your depender	nts that will be ac	ecompanying you
Dependent #1:	Child			□ Male	Female	
Name (as written on passport-attact	h copy)					
				First		Middle
Date of Birth	Place of Birth_		City		Country	
Country of citizenship		Country	of legal perma	nent residence		
Dependent #2:	Child			Male	Female	
Name (as written on passport-attack	h copy)	Family		First		Middle
Date of Birth	Place of Birth_	•	City		Country	
Country of citizenship		Country	•		·	
country of one country			or 108m perma			
Dependent #3:	Child			□ Male	Female	
Name (as written on passport-attack	h copy)					
Date of Birth	Dlago of Dirth	Family		First		Middle
Month/Day/Year			City		Country	
Country of citizenship		Country	of legal perman	nent residence		
Dependent #4: Spouse	Child			Male	Female	
Name (as written on passport-attack	h copy)					
		Family		First		Middle
Date of Birth	Place of Birth		City		Country	
Country of citizenship		Country	of legal perma	nent residence		
J 1			U 1			