School of Economics & Business Administration Certificate of Finances



The United States Department of State requires that Saint Mary's College of California verify the financial resources of all international students before issuing a Certificate of Eligibility Form I-20. It is important to the visa application process that you read and complete this form carefully.

When you apply for the F-1 Nonimmigrant Visa from a United States Embassy or Consulate, you will be required to prove that you have sufficient funds to support yourself during your studies at Saint Mary's. It is recommended that you retain all related financial documents for that purpose.

The estimated total cost of attendance for one academic year is listed below. You are required to demonstrate that you have at least the estimated total cost of attendance to be eligible for an I-20. It is important to note that your academic program may be longer than one academic year, and therefore, cost more than what is estimated below.

Estimated Tuition Costs of Attendance for 2024-2025

| Program | Tuition Estimate |
|--|------------------|
| Executive MBA | \$53,416 USD |
| Professional MBA | \$28,960 USD |
| Master of Science in Accounting | \$26,500 USD |
| Master of Science in Business Analytics | \$34,560 USD |
| Master of Science in Finance | \$38,368 USD |
| Master of Science in Management & Technology | \$42,336 USD |
| Doctor of Business Administration | \$40,040 USD |

Estimated Additional Cost of Attendance for 2024-2025

| Housing | \$17,600 USD |
|---|---------------------------|
| Medical Insurance | \$4,019 USD |
| Books & Course Materials | \$1,062 USD |
| International Student Fee | \$100 USD |
| Dependents* | \$5,000 USD per dependent |
| Estimated Additional Cost of Attendance | \$22,781 USD |

^{*}Only applicable if you plan to bring a spouse or a child with you

Instructions

To calculate the Total Estimated Cost of Attendance for the first academic year of your program, you will need to add the Estimated Tuition Costs of Attendance for your program plus the Estimated Additional Cost of Attendance. You will need to show the Total Estimated Cost of Attendance in order to receive an I-20.

Please note that the Total Estimated Cost of Attendance is an estimation of costs for the stated academic year and the actual cost of attendance may vary. Also, the cost of attendance may increase for subsequent academic years.

Requirements for Supporting Financial Documents

Saint Mary's College will only accept the following financial documents:

- o Official bank statement for a liquid account
- Letter of support from a financial institution for a liquid account
- o Completed Section C of this form
- Educational loan approval letter
- o Saint Mary's scholarship award letter

All financial documents must meet the following criteria:

- o Must be in English or accompanied by an official English translation
- Issued within the last 6 months
- o Printed on official letterhead
- o All funds must be liquid or available for immediate withdraw at any time without penalty
- o All financial documents must include:
 - o Date
 - o Account holder's name
 - Type of account
 - Current balance
 - o Currency type
 - o Financial institution stamp or seal

Saint Mary's College will not accept the following:

- Certificate of Deposit or any account that is locked for a period of time
- o Stocks, bonds, retirement accounts or trust accounts
- o Deeds to property, land or business
- o Jewelry, gold, silver or coins

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|------|------|--------|---------|
| Stud | lent | Into | rmation |

| Full Name (as it appears in passport): | | | | | |
|---|-----------------------------|-------------|--|--|--|
| Address in home country (must be a physical address – PO Box addresses will not be accepted): | | | | | |
| City of Birth: | Country of Birth: | | | | |
| Country of Citizenship: | Date of Birth (MM/DD/YYYY): | | | | |
| Gender (Choose one): Male Female Otl | ner Program of Study: | | | | |
| Dependent Information | | | | | |
| If you plan to bring any dependents with y accompany you. Note that only spouses a | | | | | |
| Dependent 1 | | | | | |
| Full Name (as it appears in passport): | | | | | |
| Country of Birth: | Country of Citizenship: | | | | |
| Date of Birth (MM/DD/YYYY): | Relationship: | | | | |
| Dependent 2 | | | | | |
| Full Name (as it appears in passport): | | | | | |
| Country of Birth: | Country of Citizenship: | | | | |
| Date of Birth (MM/DD/YYYY): | Relationship: | | | | |
| Dependent 3 | | | | | |
| Full Name (as it appears in passport): | | | | | |
| Country of Birth: | Country of Citizenship: | | | | |

Section A: Sources of Financial Support

Student Signature

| Section A: Sources of Financial Support | rt | |
|--|------------------------------------|--|
| List all sources of financial support. You will need to from the list of approved documents as outlined at | | providing a financial document |
| Personal Funds (funds from the student) | \$_ | USD |
| Sponsorship Funds (funds from any sponsor) | \$_ | USD |
| Scholarship Funds from Saint Mary's College | \$ | USD |
| Tuition Paid to Date | \$ | USD |
| Other (Please specify): | \$ | USD |
| Total | \$_ | USD |
| Section B: Sponsor Information | | |
| If you are using funds from a sponsor, have that pe | erson or agency representative co | omplete this section. |
| The undersigned sponsor certifies that they have provided is true and accurate. The undersigned support the student during their time in the United | sponsor agrees to provide at lea | ast the amount listed below to |
| Signature of Sponsor | Date (MM/DD/YYYY) | |
| Name of Sponsor or Sponsorship Agency: | | |
| Total Amount of Sponsorship Funds: | USD | |
| Section C: Financial Institution Informa | ition | |
| This section can be completed in lieu of submitting a bank representative and is not valid without an off institution assume no responsibility if the funds are | icial stamp or seal. The undersign | |
| The undersigned representative certifies that the information provided is true and accurate. The unavailable on the date listed below. | | |
| Representative Signature | Date (MM/DD/YYYY) | Financial Institution Stamp or Seal |
| Name of Representative: | | |
| Name of Financial Institution: | | |
| Name of Account Holder: | | |
| Available Balance: Currence | cy Type: | |
| | | |
| | | |
| Student Signature | | |
| By signing below, I certify that all of the information Total Cost of Attendance is an estimation and that of attendance may increase each year and I under fees. | actual amounts will vary. I ackno | wledge that the estimated cost |

Date (MM/DD/YYYY)