Graduate Kinesiology

Certification of Finances

**General Information:** The U.S. Citizenship and Immigration Services (USCIS) of the U.S. Government requires that Saint Mary’s College of California verify the financial resources of all international applicants. This form is for that purpose. It is important that you complete it carefully.

The estimated total costs for the academic year are listed below. You are required to certify that you will have the amount shown available to you. You should assume that expenses will rise about 10% for each year of study.

Please remember that student visa holders will not be authorized to work in the U.S. except under special circumstances. You should not plan on employment to provide for your support while you are a student at Saint Mary’s.

When you request your visa from the U.S. consular officials, you will be required to prove that you have sufficient funds to study at Saint Mary’s College of California. We suggest, therefore, that you make copies of this form and the related documents for that purpose.

**Estimated Costs for Graduate Kinesiology Program (14 months):**

- Tuition……………………………………………………………………………………………… $26,730
- Housing and Meals …………………………………………………………………………… $13,300
- Mandatory medical insurance……………………………………………………………….. $750
- Books……………………………………………………………………………………………… $1,660
- Transportation…………………………………………………………………………………… $1,210
- Personal Expenses……………………………………………………………………………….. $2,280
- Additional funding for dependents (if applicable) ……(cost per dependent)$3,820

**Total:…………………………………………………………………………………………….. $45,930**

**Section A: Sources of Financial Support**

Personal, family or other resources

Names of person or agency paying these funds__________________________________________

_________________________________________________________________________________

Personal/Family funds……………………………………………………………………………… $________________________

Funds from Saint Mary’s College of California (if applicable)……………………….$________________________

Total………………………………………………………………………………………………..$________________________

**Section B: Student**

I, ____________________________________________ of ____________________________,

Name, please print Country of citizenship

certify that the total amount of money that I have available for my first year of study at Saint Mary’s College in the U.S. is $________________________. This amount may increase each year, and I am responsible for the increase in fees.
**Section C: Guarantor**
The undersigned certify that they have read the information given by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.

___________________
Signature of person guaranteeing funds

______________________
Date

______________________
Name of person or agency guaranteeing funds (print)

______________________
Relationship to Applicant

Address Line 1

Address Line 2

**Section D: Bank**
The undersigned certifies that he/she has read the information given by the applicant on this form. In the opinion of the undersigned, the information above is accurate and the funds noted are expected to be available. No responsibility is assumed by the bank in giving this opinion. Please provide a bank seal or stamp.

______________________
Bank official’s Name (print)

______________________
Bank Official’s Signature

______________________
Name of Bank

______________________
Date

**Section E: Supporting Evidence**
A statement from an officer of the bank or other financial institution in which you have deposits should provide you the following details regarding your account:

1. Date account opened
2. Total amount deposited for past year
3. Present balance

*Note: The College cannot send you the forms for your student visa until complete financial certification has been obtained. Be sure to have appropriate signatures in Sections C, D and F.*

**Section F: Student Signature**
By signing this document, the student certifies that all the above statements are accurate and true.

______________________
Signature of Applicant

______________________
Date

Please return this document and supporting documents to:

Saint Mary’s College of California
Graduate Kinesiology Department
PMB 4500 Moraga, CA 94575-4500 USA
Ph. 925-631-8834