

CERTIFICATE & DECLARATION OF FINANCE FORM

PLEASE NOTE: THIS FORM IS TO BE USED ONLY WHEN REQUESTING AN EXTENSION OF PROGRAM (OR) APPLYING FOR A CHANGE OF STATUS

ESTIMATE OF EXPENSES FOR AN INDIVIDUAL STUDENT AT BARUCH COLLEGE FOR THE ACADEMIC YEAR 2009/2010

	UNDERGRAD	MBA	MBA/ HONOR	MS/ABE	MBA/ABE	MS/MA/ MPA/MSED
Tuition	\$9,960.00	\$17,640.00	\$17,640.00	\$13,800.00	\$17,640.00	\$13,800.00
Fees	\$ 370.00	\$2,388.00	\$5,388.00	\$4,238.00	\$4,238.00	\$288.00
Living Expenses	\$21,219.00	\$21,219.00	\$21,219.00	\$21,219.00	\$21,219.00	\$21,219.00
Total	\$31,549.00	\$41,247.00	\$44,247.00	\$39,257.00	\$43,097.00	\$35,307.00

MARRIED - ADD \$7,500 per year for accompanying spouse
CHILDREN - ADD \$5,000 per year for accompanying child

THE CURRENT FIGURES ARE SUBJECT TO CHANGE

PLEASE PRINT YOUR NAME AS IT APPEARS IN YOUR PASSPORT:

NAME: _____
Last (Family Name) Middle First

DATE OF BIRTH: ____/____/____
Month Day Year

ADDRESS: _____

E-MAIL ADDRESS: _____

PHONE: _____

COUNTRY OF CITIZENSHIP: _____

COUNTRY OF BIRTH: _____

SCHOOL LAST ATTENDED: _____

DATES: FROM _____ TO _____

I.N.S. ADMISSION: _____

SOCIAL SECURITY #: _____

IMMIGR. STATUS CURRENTLY HOLDING: _____

IMMIG. STATUS APPLYING FOR: F-1 _____ J-1 _____

MARITAL STATUS: SINGLE _____ MARRIED _____

IF SPOUSE OR CHILDREN RESIDE WITH YOU IN THE U.S. PLEASE COMPLETE THE FOLLOWING:
Dependent spouse and children of the F-1 student who are seeking entry/reentry to the U.S:

Name: Last First Date of Birth Country of birth Relationship to student

Name: Last	First	Date of Birth	Country of birth	Relationship to student

SOURCES OF FUNDS

U.S. \$ PER ACADEMIC YEAR

A. PERSONAL OR FAMILY SAVINGS

Send with this form, your sponsor's original bank statement in U.S. dollar equivalent showing the latest balance and a notarized sponsor's letter giving you permission to use said funds for your educational purposes and stating HOW MUCH OF IT WILL BE USED TO COVER YOUR EDUCATIONAL EXPENSES PER YEAR, along with proof that these funds will be available for the entire length of your study.

\$ _____

B. YOUR GOVERNMENT (ONLY IF YOU HAVE FUNDS FROM YOUR GOVERNMENT)

How much will your government pay for expenses while you are at Baruch? Print the name of the government agency that will pay your expenses per academic year. Enclose with this form a signed copy of your letter of award from the appropriate government agency to certify its accuracy.

_____ Name of Government Agency

\$ _____

C. OTHER SOURCES OF INCOME i.e. loans, personal income, or travel grants. Please be specific:

\$ _____

D. WILL YOU RECEIVE ROOM AND BOARD FROM A FRIEND OR RELATIVE?

If so, attach a notarized room and board letter, along with deed or lease of property.

\$ _____

TOTAL (A, B, C or D)

\$ _____

I/We hereby certify that the above information is accurate and that I/We is/are aware of the full cost of education at Baruch College as outlined on the reverse side of this form and that the funds are available and will be provided for the entire course of study.

STUDENT'S NAME (PLEASE PRINT)

STUDENT'S SIGNATURE

SPONSOR'S NAME (PLEASE PRINT)

SPONSOR'S SIGNATURE

ADDRESS

DATE

RELATIONSHIP TO STUDENT

NOTES REGARDING FURTHER DOCUMENTATION

Only Original Financial Documents, Not Older Than Three Months Will Be Acceptable.

All documents must be in English and in equivalent U.S. dollars (or the current exchange rate must be supplied by the bank).