



University of Management and Technology
committed to building futures

***Financial Certificate
for International Applicants
Requiring Form I-20 or DS-2019***

This form must be completed and submitted along with your other application materials. Your application will not be considered complete until this Financial Certificate and the necessary verification documents are received. This information is required to obtain a visa.

Please type or print legibly in black ink.

GENERAL INFORMATION

1. Name Mr. Ms. _____
Last (Family Name) First Middle

2. Permanent Address: _____
Street

City State/Province Area Code

Country

Telephone: () _____ e-mail: _____

3. This application is for : Winter Spring Summer Fall Year: _____

4. Degree or program to which you are applying:

- Associate of Business Administration
- Bachelor of Business Administration
- Master of Science in Management
- Master of Business Administration
- Master of Science in Computer Science & Information Technology
- Research Scholar (J-1 only)
- Short-Term Scholar (J-1 only)

5. Are you currently in the U.S.? Yes No

If yes, attach a photocopy of your I-94.

6. Are you presently in status F-1 or J-1? Yes No

If yes, attach a photocopy of your I-20 and DS-2019.

If you are on F-1 optional practical training, attach a copy of your employment authorization.

1901 N. Fort Myer Drive, Suite 700, Arlington, VA 22209 USA
phone: (703) 516-0035 fax: (703) 516-0985
www.umtweb.edu

INFORMATION ON EXPENSES

You are required to certify that you have sufficient fund available for your academic and living expenses. Please complete the chart on the next page of this form with the following minimum amounts in mind. These amounts are based on 2004-2005 costs; tuition and other expenses can be expected to increase annually.

| | |
|---|--|
| Tuition and Fees (vary by program) | \$7,020 (minimum tuition and fees for one academic year) |
| Books and Supplies | \$750 (minimum) |
| Living Expenses (food, housing, utilities) | \$15,600 (per calendar year) |
| Health Insurance | \$2,016 (per calendar year) |

Family Expenses: If you are married and plan to bring your spouse and/or children, you must certify that you have at least an additional \$7,500 for your spouse and \$3,000 for each child annually for the duration of your program.

Health Insurance: Health insurance is mandatory for all J visitors and strongly recommended for all students. Insurance for J visitors must meet or exceed requirements as per 22 CFR 62.14.

Employment Prohibitions: In computing your expenses, you should keep in mind that students holding student (F) or exchange visitor (J) visas cannot be authorized to work off campus to support themselves. Unless you are offered a University assistantship at the time of admission, you should not anticipate employment, either part-time during academic year or full-time during the summer, as a means of support while at the University.

INFORMATION ABOUT DEPENDENTS WHO MAY ACCOMPANY YOU

Please check where appropriate:

I plan to come alone.

I plan to bring the following dependents (please complete the information below).

The following dependents are currently with me in the U.S. and plan to remain with me (please complete the information below).

| Name | Relation | Date of Birth | City and Country of Birth |
|------|----------|---------------|---------------------------|
| | | | |
| | | | |
| | | | |

SOURCE OF FUNDS

Please complete the chart on the next page, and include with this Financial Certificate all financial verification documents requested for each founding category you will use. Financial information provided must be sufficient to cover the estimated total costs of your program for the first year.

The majority of funding for J-1 exchange visitors must be from sources other than personal or family funds.

| SOURCE OF SUPPORT | Year 1 | Year 2 | Year 3 | Year 4 |
|--|---------------|---------------|---------------|---------------|
| Self-Support A bank official must attach a statement on the bank's stationery verifying the amount you indicate for all years of study. | | | | |
| Parents or Individual Sponsors Your family or individual sponsor must sign the certification below, as well as having an official of the bank attach a statement verifying the sponsor's ability to provide you with the funds indicated. | | | | |
| Government or Agency Sponsor Enclose with this form a signed copy of your letter of award, specifying the current date, the name of the University of Management and Technology, the dollar amount pledged , and the exact starting date and length of the scholarship award . | | | | |
| University of Management and Technology Enclose a copy of your award letter from UMT. | | | | |
| Other (specify): _____ Enclose with this form a signed affidavit from a person authorized to certify the accuracy of this entry. | | | | |
| TOTAL | | | | |

APPLICANT'S CERTIFICATION

I certify that I have read the information provided on this certification, that it is true and accurate, and that the funds are available.

Applicant's signature: _____ Date: _____

OFFICIAL CERTIFICATION BY FAMILY OR INDIVIDUAL SPONSOR

I guarantee that I will provide to the above-named applicant the amount indicated above.

Sponsor's signature: _____

Sponsor's name (please print): _____

Relationship to applicant: _____

Address: _____

Telephone: () _____ e-mail: _____