

## Certification of Finances

**Please complete the entire form.**

This form and accompanying information must be submitted by email to **intl\_admissions@wpi.edu**

### CONFIDENTIAL DECLARATION AND CERTIFICATION OF FINANCES OF INTERNATIONAL UNDERGRADUATE APPLICANT

This purpose of this form is to certify that you will have the estimated sum of \$77,000 for your first year of study at WPI, not including travel expenses. You should also indicate how you will meet your expenses for subsequent years of study. A Certificate of Eligibility (Form I-20) for a Student (F1) visa will not be issued unless this form is completed and the necessary certifications are obtained. Please note that you will be required to show proof of adequate funding to US Consular officials when applying for a visa.

Please note that students holding the Student (F1) visa will be extremely limited in their options to work. Therefore, the applicant should not look to employment, either part-time during the academic year or full-time during the summer, as a guaranteed means of support while at WPI. Under no circumstances are students permitted to work full-time during the academic year. Additionally, the cost of attendance at WPI will likely increase each academic year, while scholarships will not.

In addition to completing this form, please submit a bank statement or bank letter showing proof of funding and a copy of the information page of your passport.

### PART I: APPLICANT INFORMATION

Last (Family) Name			First Name			Middle Initial		
Address (to which I-20 should be sent via DHL)								
City			State/Country			ZIP/Postal Code		
Phone number for DHL delivery (please include country and city codes)						E-mail Address		
Intended field of study								
Date of Birth			Place of Birth					
month / day / year			City			Country		
Country of Citizenship (for I-20 Issuance)								
Please attach copy of information page of passport								

### PART II: ESTIMATE OF STUDENT EXPENSES FOR THE ACADEMIC YEAR 2021-2022

Tuition and Fees (Estimated)	\$56,600
Room and Board (Estimated)	\$16,600
Books and Supplies (Estimated)	\$1,000
Medical Insurance (Estimated)	\$1,600
Personal Expenses (Estimated)	\$1,200
<b>TOTAL</b>	<b>\$77,000</b>



**PART III: SOURCES OF SUPPORT**

**INSTRUCTIONS:** Complete each column to show sources and amounts of anticipated contributions to your educational and personal expenses while you are in the United States. For each source, follow the certification instructions in the box. Include anticipated contributions for each year of required study for your degree objective.

SOURCES OF FUNDS	FIRST YEAR	SECOND YEAR	THIRD YEAR	FOURTH YEAR
<b>PERSONAL SAVINGS</b> - Please print name of bank. ..... <i>A bank official's signature or separate letter is required below if the student is supported in part or whole by personal savings.</i>	\$	\$	\$	\$
<b>PARENTS and/or SPONSORS</b> - Please print name of each person. ..... ..... <i>The signature of a parent or sponsor is required, as a guarantor on the certification below in addition to a bank official's signature/bank letter.</i>	\$	\$	\$	\$
<b>YOUR GOVERNMENT</b> - Please print name of agency. ..... <i>Enclose with this form a signed copy of your letter of award and translation, if necessary.</i>	\$	\$	\$	\$
<b>WPI - If any.</b> ..... <i>Type of award - do not include Global Scholarship</i>	\$	\$	\$	\$
<b>OTHER</b> - Please specify. ..... <i>Attach a signed affidavit from an authorized person to verify the accuracy of this entry, or a signed copy of your letter of award.</i>	\$	\$	\$	\$
<i>Each of these totals should equal the estimate of costs for one year on the Certificate of Finances (minimum \$77,000).</i> <b>TOTAL:</b>	\$	\$	\$	\$

In case of emergency, are there sources of additional funds available to you once you arrive in the U.S.?  
 \_\_\_\_\_

**PARENT/SPONSOR CERTIFICATION**

This is certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

Parent/Sponsor's Signature  Date \_\_\_\_\_  
 Parent/Sponsor's Name (printed) \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_  
 Parent/Sponsor's Address (if different than applicant) \_\_\_\_\_

I certify that the above information is correct and complete, and the funds are available.

Applicant's Signature  Date \_\_\_\_\_