

## AFFIDAVIT OF FINANCIAL SUPPORT FOR INTERNATIONAL APPLICANTS

**IMPORTANT:** International students must present satisfactory evidence of adequate funds available to meet financial obligations at educational institutions in the United States. **An I-20 Form cannot be issued until this form and all original required documents have been received by Nazarene Theological Seminary.** The student must be prepared to pay all tuition and fees for the term at the time of registration. NTS is required by the U.S. Bureau of Citizenship and Immigration Services (USCIS) to obtain evidence that all applicants have adequate funds for their education and living expenses while studying at the Seminary. Estimated minimum costs of attending NTS can be found on the NTS website at [www.nts.edu](http://www.nts.edu).

### Applicant's Personal Information

Name in full as it appears on passport:

Family Name (surname) \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth (mo/day/year) \_\_\_\_\_ Country of Citizenship \_\_\_\_\_ Occupation \_\_\_\_\_

Country of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_ Country of Residence \_\_\_\_\_

E-mail Address \_\_\_\_\_

Are you presently residing in the U.S.?  Yes  No

If yes, what is your current status?  F1  J1  H1  Other \_\_\_\_\_

If you hold an F-1 visa, what institution issued the I-20? \_\_\_\_\_

If you are presently an F1 student, where are you enrolled? \_\_\_\_\_

If you are presently on OPT, when will it expire? \_\_\_\_\_

### Dependent Information (if applicable)

Will you be bringing dependents with you to NTS?  Yes  No If yes, please complete the table below.

Dependent	Family Name (Surname)	First Name	Date of Birth	Country of Citizenship	Country of Birth	City of Birth	
Spouse							
1 <sup>st</sup> Child							Male/Female (circle one)
2 <sup>nd</sup> Child							Male/Female (circle one)

(You can make an additional copy of this section if you are bringing more than two children.)

### Directions for Completing Sponsorship Information

You are required to indicate who will be sponsoring you and the amount you expect to receive for the first year you are planning to be enrolled at NTS. You are also required to submit bank statements documenting that you have available funding to cover the expenses for your first year of study. For bank statements to be acceptable, they must be original documents written in English, recently prepared, and showing the amount on account, expressed in U.S. dollars or the type of currency used. The immigration documents will not be issued until NTS is satisfied that you will receive adequate financial support to cover all of your educational expenses for the first year of your studies. Review the following instructions before completing the form below.

**1. Self Support:** Complete the "self support" section if you have personal savings and intend to use this money for all or part of your financial support. Indicate the name of your bank where your funds are held and attach a bank statement to this form. The bank statement needs to indicate that you are the account holder.

**2. Parents or Personal Individual Sponsors:** If your parents or others will be sponsoring all or part of your expenses, they should indicate below the amount of funds they will provide, sign the *Affidavit of Financial Support Certification* and attach a bank statement. The name of the account holder on the bank statement must be the same as the signature on the *Affidavit* and needs to show at least the amount your sponsor(s) have indicated they will provide to cover first-year expenses.

**3. Government or Other Sponsoring Agency:** If a government or another sponsoring agency (i.e. organization, institution, employer) is providing funding, indicate the name of the agency and include a letter from the agency detailing the terms of your award. The letter of award must be signed by an authorized representative of the agency and should provide the following information:

- Will the sponsoring agency pay all tuition and fees? If not, how much will be provided? Should the agency be billed directly?
- Will the agency provide you with living expenses? If so, how much?
- How long is the sponsorship valid? One year, two years, or renewable until the degree is awarded?
- Will the sponsor be willing to provide you with extra support should your spouse or children accompany you? If so, how much?

### Sponsorship Information

Please indicate the amount of assured support for the first year of study. Bank statement verification is required.	Amount of Assured Support
<b>Sources of Funds</b>	<b>First Year</b>
<b>1. Self Support</b>  <b>Bank Name:</b> _____ Attach a current bank statement in English from an official of your bank on the bank's stationery verifying the total amount on account that is assured to cover your expenses for your first year of study at NTS.	<b>Self Support</b>  \$ _____
<b>2. Parents or Personal Individual Sponsors</b>  <b>Name of 1<sup>st</sup> Sponsor:</b> _____  <b>Name of 2<sup>nd</sup> Sponsor:</b> _____  This section may be used for up to two sponsors. Each sponsor must attach a current bank statement (in English and on the bank's stationery) and the statement must show that there is enough money on account to cover the amount of support <b>assured</b> for the first year of study. Each sponsor must then complete and sign the appropriate <i>Affidavit of Financial Support Certification</i> statement below.	<b>1<sup>st</sup> Sponsor</b>  \$ _____  <b>2<sup>nd</sup> Sponsor</b>  \$ _____
<b>3. Your Government or Other Sponsoring Agency</b>  <b>Name of Agency:</b> _____ <b>Enclose a signed copy of your award letter with this form.</b>	\$ _____

### Affidavit of Financial Support Certification

**Your Sponsor(s) Must Complete and Sign This Section.**

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

**1<sup>st</sup> Sponsor**

**2<sup>nd</sup> Sponsor (if applicable)**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(mo/day/year)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(mo/day/year)

Name (print) \_\_\_\_\_

Name (print) \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_

Phone number \_\_\_\_\_

E-mail address \_\_\_\_\_

E-mail address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

(You may also make an additional copy of this form if you have additional sponsors.)

**Signature of Applicant**

I certify that all the statements on this form are correct and complete. I fully understand the minimum amount of funds necessary for fees and living expenses while attending Nazarene Theological Seminary, and I verify that a minimum of the amount indicated in the chart on the first page will be available per year.

I also understand that I am strongly encouraged to obtain and maintain health insurance coverage for myself (and my dependent(s)) for the full duration of my enrollment at Nazarene Theological Seminary which meets the following requirements: medical benefits of US \$100,000 per accident or illness with copayments not to exceed 25%, and maximum US \$100 deductible; repatriation benefits of US \$7,500; medical evacuation benefits of US \$10,000. I'm also encouraged to make sure my insurance policy will meet Title IX requirements and pay for pre-existing conditions after six months of continuous coverage.

I understand that providing false or misleading information can result in the denial of my application; or, if admitted, in my disenrollment from Nazarene Theological Seminary and/or deportation from the United States.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Return completed form with required documentation to:  
NTS Admissions, 1700 E. Meyer Blvd., Kansas City, MO 64131, USA**