



**AFFIDAVIT OF SUPPORT FOR INTERNATIONAL STUDENTS SEEKING F-1 VISA STATUS**

International students who are admitted into a degree program at CIHS must receive a Certificate of Eligibility (Form I-20) to enable them to obtain an F-1 Student Visa to enter and/or remain in the U.S. in legal F-1 student status. This federal immigration requirement applies to both international students who are coming from abroad and to F-1 students who are transferring from another U.S. institution inside the United States.

**I-20 Requirements: For CIHS to issue you a Form I-20 once you are accepted, you must submit the following:**

- 1) This form with **Section A** and **Section B** both completed, including signatures from both you (the student) and your sponsor(s).
- 2) A copy of your passport biographical page (and visa page, if you are in the United States). If your dependents (spouse/children) will join you, please provide a copy of each dependent’s passport biographical page, marriage certificate for you and your spouse in English, and the birth certificates for your children in English.
- 3) Original bank statement(s), on bank letterhead, in your name or in your sponsor’s name. Please note:
  - a) Bank statement(s) must be no more than 3 months old at the time of submitting this form.
  - b) The account balance(s) must be shown in amounts greater than or equal to the amount listed below for a minimum of one academic year.
  - c) Bank statements must be for a checking, savings, or time deposit account. Brokerage (stock funds), real estate, or any other non-liquid assets are **not** acceptable.
  - d) Bank statements must be written in English and in U.S. dollar currency or its foreign equivalent in your home country currency in amounts greater than or equal to \$39,200 (USD).

*Note: Add \$5,000 per year for each additional dependent (spouse or child) joining you.*

**Estimated Annual Costs Based on a 12-Month, Full-Time Enrollment at CIHS**

M.A. & Ph.D. Programs	
Tuition Per Year	\$12,040 (per year)
Rent & Utilities	\$18,000 (per year)
Food	\$4,460 (per year)
Transportation	\$2,400 (per year)
Health Insurance	\$800 (per year)
Books & Fees	\$1,500 (per year)
<b>TOTAL</b>	<b>\$39,200 (USD)</b>
<i>If with dependents</i>	<i>Add \$5000 to above amount for each dependent</i>

**SECTION A: STUDENT AND DEPENDENTS**

Student's Name: \_\_\_\_\_

Email address: \_\_\_\_\_

Address (Where I-20 should be mailed): \_\_\_\_\_ (street address)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
City State/Province Zip/Postal Code Country

Degree Program:  MA  PhD Major at CIHS: \_\_\_\_\_ Concentration: \_\_\_\_\_

Enrollment Quarter:  Fall  Winter  Spring  Summer Year: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_ Spouse's date of birth (mm/dd/yyyy) \_\_\_\_\_

Spouse's Country of Birth \_\_\_\_\_ Spouse's Country of Citizenship \_\_\_\_\_

List all dependents' (your children) names, dates of birth, country of birth, and country of citizenship (use additional paper if necessary and provide copies of your spouse and dependent's passport name page(s): \_\_\_\_\_

Will your dependents come to the U.S. with you?  Yes  No

**Please identify your source of funds (check all that apply):**

Personal Funds  Family Funds  Scholarship  Other source (specify) \_\_\_\_\_

**I certify that a minimum of \$ \_\_\_\_\_ (specify amount) will be available to cover my expenses at CIHS.**

(Enclose a bank letter, bank statement, or scholarship award letter).

\_\_\_\_\_  
Applicant's Signature\*

\_\_\_\_\_  
Today's Date (mm/dd/yyyy)

**SECTION B: SECTION FOR FINANCIAL SPONSOR (If applicable)**

Name of Sponsor: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
Name of Scholarship Agency, point of contact, phone number, email, and address (if applicable)

**As the financial sponsor of the above applicant, I certify that a minimum of \$ \_\_\_\_\_ (specify amount) will be made available to cover the student's expenses at CIHS.** (Enclose a bank statement or scholarship letter).

\_\_\_\_\_  
Sponsor's Signature\*

\_\_\_\_\_  
Today's Date (mm/dd/yyyy)