

Supplemental Packet for Admission of Graduate International Students

THE GRADUATE SCHOOL
CHICAGO STATE UNIVERSITY
9501 So. King Drive/LIB 338
CHICAGO, IL 60628-1598

IF YOU DID NOT RECEIVE AN ADMISSION APPLICATION, EMAIL THE GRADUATE
SCHOOL - AT G-STUDIES1@CSU.EDU OR CALL 773/995-2404.

The Graduate School
Chicago State University
9501E So. King Drive, LIB 338
Chicago, IL 60628-1598
773/995-2404

CERTIFICATE OF SPONSORSHIP

Name of Student _____
Family Name Given Name Middle

Do not sign this certificate **until** you have an authorized notary public ready to witness your signature.

I, _____ of _____
Street Address

(City/Town) (Province) (Country)

hereby declare my intentions to undertake full financial responsibility and all other liabilities for _____
_____ during his/her education and stay in the United States.

Print Name (Sponsor) Date

Signature of Sponsor Date

To be completed by Notary Public:

I, _____, a notary public appointed in _____,

do hereby certify that _____ is the same person whose name is
subscribed to the foregoing instrument, appeared before me this day in person, and acknowledge that he/she signed
and delivered the said instrument as his/her free and voluntary act for the uses and purposes therein set forth.

Given under my hand and official seal,

this _____ day of _____ (month) in the year _____.

Signature of Notary SEAL _____

Financial Statement for International Students

CONFIDENTIAL

Each student must be prepared to accept full responsibility for the expenses incurred while studying in the United States. The following figures indicate the minimum amount for one academic year of study and twelve months of living expenses. **(Yearly costs are subject to change.)**

ESTIMATE OF YEARLY COSTS

Tuition & Fees	\$9,200.00	Transportation	\$1,500.00	Housing & Food	\$7,200.00
Miscellaneous	\$3,500.00	Health Insurance	\$500.00	Books & Supplies	\$600
Other _____					

Total Costs = \$22,500.00

Indicate Source of Funds (*Amounts in US dollars*)

Student Name _____
Family Name _____ Given Name _____ Middle Name _____

Personal Savings \$ _____

Name and address of Bank _____

Enclose with the form a statement from an officer of the bank certifying that the funds indicated are available.

Employment (if applicable) Salary \$ _____

Name and address of Employer _____

Enclose with the form a statement from your employer indicating the nature, duration of employment and salary paid.

Personal Sponsor Amount \$ _____

Name and address of sponsor _____

Relationship of Sponsor to student _____

Enclose with this form a notarized statement from sponsor indicating the accuracy of this entry and documented evidence that the sponsor has the funds available.

Governmental Sponsor (if applicable) Amount and duration of award \$ _____

Name and address of Agency _____

Enclose a signed copy of your award letter.

CERTIFICATION

I certify that the financial information provided on this form is a true and accurate statement of resources available to me. For my first academic term at Chicago State University, I have a total amount of \$ _____ available to me and a total of \$ _____ available for each subsequent year. Evidence of these resources is attached in the form of an affidavit of sponsor support, bank, employer, and/or award letter.

Signature

Date

Signature of Notary

SEAL