

CERTIFICATION OF FINANCES

**This form must be properly signed or stamped with a seal from the sponsor's or family member's financial institution.
An official letter from a financial institution with a signature can be used instead of this form.**

A Form I-20 or DS-2019 will not be authorized until this document is fully completed, with specific U.S. dollar amounts, and returned to the Office of International Education with your application.

PART ONE: TO BE COMPLETED BY THE STUDENT (This section MUST be completed first by the student.)

Student's full legal name: _____
Surname First Middle

The estimated total amount required for a semester in 2021-2022 academic year (5 months) is \$11,874 (in U.S. dollars).

\$3,700 Meals On-Campus for full year @ \$7,400 (or \$3,700 per semester)

\$4,075 Room On-Campus for full year @ \$8,150 (or \$4,075 per semester) (estimate)

\$1,735 Personal expenses (incl. transportation, telephone, necessities, entertainment) @ \$3,470 for full year (or \$1,735 per semester)

\$1,414 Health Insurance @ \$2,828 for full year (or \$1,414 per semester) (estimate)

\$700 Books and supplies @ \$1,400 for full year (or \$700 per semester) (estimate)

\$250 Immunization Requirements @ \$250 (1 time fee - amount may be less depending on vaccinations & other medical services)

_____ Expenses of dependents (if applicable) @ \$5,000 per person

PART TWO: TO BE COMPLETED BY THE FINANCIAL INSTITUTION

The above-named student will be attending the University of Richmond during the 2021-2022 academic year.

We, the undersigned, certify that the student listed above has sufficient funds available to cover the appropriate expenses as listed above in Part One. **The total amount available for a semester in academic year 2021-22 (5 months) is \$ _____ (in U.S. dollars).**

Name of Financial Institution: _____ Telephone number: _____

Mailing address of bank or financial institution: _____

Financial Officer's Name (printed or typed): _____

Financial Officer's Title: _____

Financial Officer's Telephone Number: _____

Financial Officer's Signature: _____

Date signed: _____
month day year

In this space, please place a stamp or official seal of the bank or financial institution.