UNIVERSITY OF ARKANSAS AT PINE BLUFF

FINANCIAL STATEMENT
FOR PROSPECTIVE F-1 VISA-UNDERGRADUATE INTERNATIONAL STUDENTS

2014-2015 Academic Year

NOTE: This form is updated by the Office of International Programs and Studies (OIPS) at the end of each fiscal year. No further changes or modifications may be made to this document without the permission of the Principal Designated School Official (PDSO) who is responsible for the issuance of I-20 Forms required by international students for visa purposes. If you are unable to complete this form by June 30, 2015, which is the end of the UAPB fiscal year, please contact the PDSO at the earliest possible convenience at moorep@uapb.edu or (870) 575-8545.

The University of Arkansas at Pine Bluff requires that all on-campus and off-campus undergraduate international students certify that they have an estimated amount in total financial assistance that is available to them for their study in the U.S. This amount includes scholarships, graduate assistantships, personal resources and support from parents and/or sponsors. It also includes $5,000 in U.S. currency for emergency/contingency purposes. On-campus undergraduate international students must certify $25,998.00 from all sources. Off-campus undergraduate international students must certify $35,718.00 from all sources. Please complete the form below to indicate funding that will be provided by the student, parents or sponsors. (NOTE: if the applicant is the recipient of a full scholarship, evidence of $5,000 in personal/family/sponsor support is still required.) Secure the appropriate signatures and return this form with bank or notary stamp along with supporting bank/financial statements (notarized or stamped) to the Office of Admissions.

Print Name of Applicant (as it appears in passport): ______________________

Applicant’s Country of Citizenship: ____________________________ Applicant’s Country of Birth: ___________________

Requested Degree Level and Program of Applicant: ______________________

Applicant’s (Overseas) Address, including street address, city, state/province/territory, postal code & country):

____________________________________________________________________________________

____________________________________________________________________________________

Financial Agency’s Name, Postal Address and Email Address:

____________________________________________________________________________________

____________________________________________________________________________________

Total Amount of Funding Available from Student, Parent(s) and/or Sponsor(s): ______________________

Bank or Financial Agency Official (must be notarized if bank does not have a stamp):

Name: ____________________________________ Signature: ______________________________________

Parent/Sponsor’s Name (printed): ___________________________________________________

Parent/Sponsor’s Signature: ____________________________ Date: __________________________

SIGNATURE OF APPLICANT: ______________________________________ Date: ________________

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University of Arkansas at Pine Bluff • Office of Admissions • Mail Slot 4982
(870) 575-8492 (Office) • (800) 264-6585 (Toll Free) • (870) 575-4607 (Fax)

Revised, July 17, 2014