ECU LANGUAGE ACADEMY FINANCIAL REQUIREMENTS

The I-20 Form cannot be issued until you have been admitted to East Carolina University Language Academy, have satisfactorily completed this form and have returned it to the Office of Global Affairs with the evidence of financial resources.

Please email all required documents to Julie Williams at williamsjul@ecu.edu

Your financial support can come from any combination of the following sources in the United States or abroad. The submitted documents must prove the availability of liquid funds. The documents must be less than six months old and in English.

1. **Personal Funds** (your own savings)
   - Bank statement in your name
   - Bank letter on official bank letterhead stating the current balance, when the account was opened and the average balance

2. **Sponsors** (Parents, relatives, friends who will provide you with support in the form of cash)
   - Affidavit of Support (this form may be photocopied for each sponsor) and bank statement in the name of the sponsor
   - Affidavit of Support (this form may be photocopied for each sponsor) and bank letter on official letterhead stating the current balance, when the account was opened and the average balance

3. **Sponsors of Room and Board** (Parents or relatives who will provide you with support in the form of room and board for which you do not have to pay)
   - Affidavit of Support for Room and Board by a local provider
   - Photocopy of lease, deed, or rent receipts
4. **University Funds**
   - Original award letter or contract stating the exact amount that you will be receiving, what it will cover, and for how long.

5. **Financial Support from Government Agency or Organization**
   - The original award letter stating the exact amount that you will be receiving, what it will cover, and for how long

We advise you to obtain an additional set of financial documents since they are required by the United States Consular Office during the visa application process.

Tuition and fee charges are based on proposed rates and are subject to change.

Expenses for attending East Carolina University Language Academy for one semester are indicated below. Tuition and fees are payable on registration day at the beginning of each session.

**ECULA 2017-2018 Semester Expenses**

*This is the total minimum amount you must show proof of. The amount is based on ECU’s estimated cost of attendance for one semester.*

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and Fees</td>
<td>$5,900</td>
</tr>
<tr>
<td>Living Expenses</td>
<td>$4,685</td>
</tr>
</tbody>
</table>

**Total** $10,585

(This is the minimum amount that you must prove)

**PLUS**

Dependent Costs:

If a spouse will accompany you please add $4,000 and/or $2,000 for each child.
CONFIDENTIAL FINANCIAL INFORMATION FORM

Please print your full name exactly as it appears on your passport.

**Name:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First/Given Name</th>
<th>Middle Name</th>
</tr>
</thead>
</table>

**Date of Birth:** __________________________  
  Month/Day/Year

**Country of birth:** __________________________  **City of Birth:** __________________________

**Country of citizenship:** __________________________  **Gender:** □ Male □ Female  
  **Marital Status:** □ Single □ Married

If a spouse or children will be coming with you, please provide the information about each dependent you plan to bring:

**Dependent 1:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First Name</th>
<th>Relationship (Spouse/child)</th>
<th>Gender (M/F)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>City of Birth</th>
<th>Country of Citizenship</th>
</tr>
</thead>
</table>

**Dependent 2:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First Name</th>
<th>Relationship (Spouse/child)</th>
<th>Gender (M/F)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>City of Birth</th>
<th>Country of Citizenship</th>
</tr>
</thead>
</table>

**Dependent 3:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First Name</th>
<th>Relationship (Spouse/child)</th>
<th>Gender (M/F)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>City of Birth</th>
<th>Country of Citizenship</th>
</tr>
</thead>
</table>
**Dependent 4:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First Name</th>
<th>Relationship (Spouse/child)</th>
<th>Gender (M/F)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>City of Birth</th>
<th>Country of Citizenship</th>
</tr>
</thead>
</table>

**Dependent 5:**

<table>
<thead>
<tr>
<th>Family Name</th>
<th>First Name</th>
<th>Relationship (Spouse/child)</th>
<th>Gender (M/F)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>City of Birth</th>
<th>Country of Citizenship</th>
</tr>
</thead>
</table>

**Permanent Address** (in your home country):

Address: ________________________________________________________________

City: ____________________________ Province/State: __________________________

Postal code: ____________________________ Country: __________________________

Phone: ____________________________ E-mail: ____________________________

**Current Address** (in the United States, if any):

Address: ________________________________________________________________

City: ____________________________ Province/State: __________________________

Postal code: ____________________________ Country: __________________________

Phone: ____________________________ E-mail: ____________________________

Can you pay your round-trip travel to the United States?  □ Yes  □ No

Do you plan to live in campus housing?  □ Yes  □ No
Specify the amount in U.S. dollars that will be available to you for your education each session of your enrollment:

- Personal Funds $ __________
- Financial Support from a Sponsor $ __________
- Financial Support from a second Sponsor $ __________
- Financial Support from a third Sponsor $ __________
- Room and Board provided by a Sponsor $ __________
- Financial Support from Government Agency or Organization $ __________
- Funds from East Carolina University $ __________

**TOTAL AMOUNT OF AVAILABLE FUNDS** $ __________

By singing this form, I certify that the information above is complete and correct.

Signature of Applicant _____________________________ Date: ____________

How would you like to get your I-20?

☐ Mail

The I-20 Form will be mailed to the name and address you provide below.

Name: ____________________________________________
Street: ___________________________________________________________________
City: __________________ State: ___________ Postal Code: ___________
Country #: ___________ E-mail: __________________ Phone: _________________

☐ Hold for Pick Up by:

Name: __________________________
E-mail: _________________________ Phone: _______________
AFFIDAVIT OF SUPPORT

I hereby certify that I am able, willing, and do promise to provide _______________________,
Name of the Student

who is my ____________________________ with the minimum amount of $ ________________,
Relationship to the Student

payable in U.S. dollars for tuition, fees, and all other expenses during his/her studies at East Carolina
University Language Academy. I have attached evidence of my financial ability in the form of a bank
statement or bank letter.

Name of the Sponsor (please print): ________________________________________________

Signature: _______________________________ Date: ________________

AFFIDAVIT OF SUPPORT FOR ROOM AND BOARD BY A LOCAL PROVIDER  
To be completed only by the person who owns or rents the property

I hereby affirm that I own, rent, or lease the property described below and that I will make it available free of charge to ____________________________ for the duration of his/her studies at East Carolina University Language Academy. I have attached a photocopy of a lease, deed, or rent receipts in my name.

My relationship to the student is: ______________________________________________________Parent, Spouse, Brother, Sister, Friend, etc.

Address of the residence offered to the student:

Street: __________________________________________________________________________

City: __________________ State: __________ Postal Code: __________

How many rooms are in the house or apartment? ________________________________

How much space will be reserved for the exclusive use of the student? ________________________

Check one:

☐ I own this property.

☐ OR

☐ I rent this property.

Do you reside at this property? (Yes or no) ________________________________

I will not require any type of service to be provided in exchange for this benefit.

This declaration represents an equivalent of $ 4,685 in cash toward support of the student.

Name of the Sponsor (please print): ________________________________________________

Signature: ___________________________ Date: ___________________