

**AFTER FINAL ACADEMIC ADMISSION, Mail to:**  
**Office of International Students**  
**The Graduate Center, CUNY**  
 365 Fifth Avenue, Room 7200  
 New York, NY 10016-4309, USA

Name \_\_\_\_\_  
Family Name Given Name

## Request for Certificate of Eligibility (Form I-20 or DS-2019) for International Students

**THIS APPLICATION MUST BE COMPLETED BY ALL INTERNATIONAL STUDENTS WHO WISH TO OBTAIN F-1 OR J-1 STUDENT STATUS.**

International students who are admitted into a degree program at the Graduate Center of the City University of New York must obtain a **Certificate of Eligibility** from the University in order to enter and/or remain in the U.S. in F-1 Student Status or J-1 Exchange Visitor Status. This applies whether you are a **new student**, a **transfer student from another U.S. university**, or a **student transferring to the Graduate Center from another CUNY college**.

Please complete this **Request for Certificate of Eligibility** (pp. 1–2) and Declaration & Certification of Finances (p. 3) and return them directly to the Office of International Students with all required documentation. **The Certificate of Eligibility will be issued only if you are admitted to the Graduate Center and if you have properly completed and returned this form, and all documentation of financial support verifying that you have adequate financial resources to meet your expenses during the period of your study in the U.S.**

### 2012–2013 Minimum Estimate of Yearly Expenses for International Students at the Graduate Center, CUNY

<b>Tuition and Fees*</b>	<b>12 months</b>
Doctoral Level I (\$755/credit, assumes registration for 9 credits/WIUs per semester) . . . . .	\$13,903
Doctoral Level II . . . . .	\$11,133
Doctoral Level III . . . . .	\$4,163
Master's (\$675 per credit, assumes a minimum of 9 credits per semester) . . . . .	\$12,463
School of Journalism (15 credits per semester) . . . . .	\$25,793
<b>Living Expenses</b>	
Books and Academic Supplies . . . . .	\$1,180
Transportation . . . . .	\$1,450
Room (assumes shared living quarters) . . . . .	\$7,100
Food and Meals . . . . .	\$5,270
Personal (includes estimate for health insurance and taxes) . . . . .	\$6,250
<b>Total Living Expenses</b>	<b>\$21,250</b>
<b>Total First Year Expenses (Doctoral Level I) . . . . .</b>	<b>\$35,153</b>

First-time F-1 status students must pay the SEVIS fee, currently \$200.

\*All tuition, fees, and living expenses are **subject to change without notice** at any time upon action by the City University of New York.

**Note:** The estimate of tuition and fees in Doctoral Level I is based on an average of 9 billable credits/WIUs per semester. Actual tuition may be higher or lower depending on individual program requirements and the number of billable credits for which a student registers.

**DEPENDENTS:** Students with accompanying dependents must verify a minimum **additional \$4,950.00 for their spouse** and **\$3,800.00 per child** for each year of study.

Please note that the above amounts represent a conservative estimate of New York City living costs. Many students will require additional funds. It is anticipated that all costs will increase by 3–5% each year. Please take this into account when completing the following forms.

*This form is valid only for the 2012–2013 academic year. If you are admitted and you request a postponement of your admission, you will need to request a new form.*

The following personal information is required to prepare a SEVIS Certificate of Eligibility for form I-20 or DS-2019.

#### INFORMATION REQUIRED FROM ALL INTERNATIONAL STUDENTS FOR F-1 or J-1 STATUS (Please print clearly.) INCLUDE COPY OF PASSPORT ID PAGES.

**Name** \_\_\_\_\_ **Sex**  Male  Female  
(family name as in passport) (given name as in passport) (second given, or middle name, if any, as in passport)

**Present Mailing Address** \_\_\_\_\_  
(street address) (city, state) (country) (postal code)

**Telephone Number** \_\_\_\_\_ **Email** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Place of Birth** \_\_\_\_\_ **Citizenship** \_\_\_\_\_  
(month/day/year) (city and country)

**Permanent Residential Address outside the United States — This is required by U.S. government regulations.**

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Province/State** \_\_\_\_\_

**Country** \_\_\_\_\_ **Postal Code** \_\_\_\_\_

**Address in New York (if any)**

(number and street) (city) (state) (zip code)

**Occupation in Home Country** (If currently a student, give name of school and level of education.)

**Education** List chronologically all **U.S. institutions** attended beyond secondary school. Include each division of the City University of New York attended.

Institution	Dates of Attendance	Immigration Status
	from to	
	from to	
	from to	
	from to	

**Date of Initial Entry into the U.S. in F-1 or J-1 Status (if currently in the U.S.):**

month day year

**Expected Semester of Enrollment**

Fall 2012  Spring 2013

**Field of Study:**

**Degree Program:**  Master's Journalism  Master's  Doctoral

**Type of Admission:**

New Admission  Readmission  Transfer from U.S. Institution

**(If transfer, give name and address of current U.S. school)**

**Dependents** Please provide the following information for any members of your immediate family (spouse and/or children) who will accompany you to the Graduate Center. Students with accompanying families *MUST* verify an additional \$4,950 for spouse and \$3,800 for each child during each year of study. You will need to document financial support for the individuals indicated.

Name	Relationship to Student	Date of Birth	Place of Birth	Country of Citizenship

**TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.**

If you are currently in the U.S., please indicate your current immigration status. Attach a copy of the **passport pages with the passport number, expiration date of passport**, and the visa stamp. Include **copies of both sides of Form I-94** for yourself and accompanying family members.

**F-1 Student Status** **I-94 Admission #** **Attach copies of ALL your I-20 forms (pages 1 & 3).**

**University that issued most recent Form I-20** **SEVIS No.**

**J-1 Exchange Visitor Status** **Program #** **I-94 Number** **Attach copies of ALL your DS-2019 forms.**

**Name and Address of Sponsoring Institution** **SEVIS No.**

**B-2 Visitor Status**  **Other Immigration Status (Type: )**

**I-94 Expires on:** **I-94 Admission No.**

**TO BE COMPLETED BY APPLICANTS CURRENTLY OVERSEAS**

If you are not in the U.S., what type of visa do you plan to obtain to enter the U.S.?

**F-1 Student Visa**  **J-1 Exchange Visitor Visa**  **Other Visa (Type \_\_\_\_\_)**

If you were previously present in the United States, complete the following:

**Date entered the US.** **Status** **Date left the U.S.**

**Visa type** **Visa expires on** **Optional Practical Training dates: from to**

# Declaration & Certification of Finances

**Documentation of financial support must reach the Graduate Center as soon as possible so as not to delay meeting immigration status requirements.**

Please indicate the source and amount of your financial support for **the first four years** of study (for master's degree, two years). The Office of International Students requires documentation of **guaranteed support for the first year and projected support for future years**. Total amounts *must* meet or exceed the estimate of expenses on page 1, including estimates for any dependents. You must attach the required documentation for each source of financial support you indicate *before you will be issued* a Form I-20 or DS-2019.

**Submit original documents in support of this application. Prepare an additional set of original documents if required (i.e., in support of a visa application to a U.S. Consulate overseas).**

**Complete and send this page directly to the Office of International Students with your application for Certificate of Eligibility.** Provide as much detail as possible. If financial support is pending, you may return detailed support verification later.

**NOTE: If you must apply for a visa to enter the United States, we should receive all completed financial support documents at least three months before the semester begins.**

SOURCES OF FINANCIAL SUPPORT	Amount in U.S. Dollars			
	Guaranteed Support 2012–2013	Projected Support		
	2012–2013	2013–2014	2014–2015	2015–2016
<b>City University of New York (Fellowship, Scholarship, or Assistantship)</b> Supply copy of Financial Aid Award Letter or official program support letter. Type of Financial Award: _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>Parents and/or Other Individual Sponsor (must complete Affidavit of Support on page 4)</b> Name _____ Relationship _____  The sponsor must provide the following documents in English: 1) Notarized Affidavit of Support (see page 4). 2) Current Letter from Employer Indicating Annual Salary, in U.S. dollars. 3) 2 months' most recent bank transactions summary statement.	\$ _____	\$ _____	\$ _____	\$ _____
<b>Government or Other Institutional Sponsorship</b> Name of Sponsoring Institution: _____  Attach Current Signed Official Copy of the <u>Terms</u> of Sponsorship, including <u>Amount</u> of Support in U.S. Dollars and <u>Period</u> Covered.	\$ _____	\$ _____	\$ _____	\$ _____
<b>Personal Savings</b> Name of Bank _____ Location of Bank _____ (city) (country)	\$ _____	\$ _____	\$ _____	\$ _____
Attach <b>2 months'</b> most recent bank statements showing bank transactions history. <b>Note: Bank statements alone, without documentation of a SOURCE of support, are not sufficient to guarantee support for a Certificate of Eligibility.</b>				
<b>Other</b> Specify Source: _____  Attach Validated, Official Documentation Stating Amount of Support in U.S. Dollars and Period Covered.	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL</b>	\$ _____	\$ _____	\$ _____	\$ _____

(Each total must equal the estimate of expenses for one year; costs may rise 3–5% annually.)

**Form I-20 or DS-2019 will not be issued until all requirements for financial documentation are met.**

By signing my name to this form, I certify that the information supplied above is, to the best of my knowledge, a correct statement of my finances for my studies at the Graduate Center, the City University of New York.

\_\_\_\_\_  
(student's signature) (date)

\_\_\_\_\_  
(please print name)

# Affidavit of Support

**NOTE: PLEASE READ AND UNDERSTAND THIS ENTIRE AFFIDAVIT BEFORE COMPLETING.**

This affidavit is for an individual using his/her own **income to provide the student with financial support.**

**Items #1–4 must be completed by all sponsors. Other F or J status individuals may not provide cash support for a student.**

**SPONSOR INFORMATION – (must be completed by all sponsors)**

1) I, \_\_\_\_\_, citizen of \_\_\_\_\_

living at \_\_\_\_\_

2) certify that I am employed as \_\_\_\_\_ with \_\_\_\_\_

(job title)

(name of employer)

located at \_\_\_\_\_

(full address of employer)

I receive an annual income of \$ (U.S.) \_\_\_\_\_

**Attach a letter, in English, confirming current employment and annual income. Retired or self-employed sponsors must provide appropriate annual income documentation. NOTE: Only annual income documentation can verify your ability to support the student.**

3) In addition, I have current available money (checking or savings) of \$(U.S.) \_\_\_\_\_ with \_\_\_\_\_

(name of bank)

located at \_\_\_\_\_

(full address of bank)

**Provide recent bank statements showing two months of transaction history. NOTE: Bank statements only verify the immediate availability of funds, not the ability to provide continuing support.**

4) I am currently responsible for the financial support (including myself) of \_\_\_\_\_ individuals. My total annual expenses are \$(U.S.) \_\_\_\_\_

**Note: Total annual INCOME and total annual EXPENSES will be evaluated to determine sponsor's ability to support the student. Bank accounts are not sufficient to verify continuing support.**

**STUDENT SUPPORT INFORMATION – (must be completed by sponsors providing cash support)**

5) I certify that I am able to and do commit to provide \_\_\_\_\_ who is my \_\_\_\_\_

(name of student)

(relationship to sponsor)

born on: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ and who is a citizen of \_\_\_\_\_

6) with the annual cash amount of \$ (U.S.) \_\_\_\_\_

to meet his/her expenses each year during study at the Graduate Center of the City University of New York

until \_\_\_\_\_ (a minimum of four academic years is generally required).

**ROOM AND BOARD SUPPORT INFORMATION – (must be completed only if the student will live permanently in the sponsor's home in the United States)**

7) I certify that I will provide \_\_\_\_\_ date of birth \_\_\_\_\_ citizenship \_\_\_\_\_

(name of student)

**free room** in my home as listed above in #1 (valued at \$6,800 per year) OR

**free room and meals** in my home as listed above in #1 (valued at \$8,800 per year)

while the student follows a program of study at the Graduate Center of the City University of New York.

**NOTE: THE VALUE OF THIS SUPPORT SHOULD NOT BE INCLUDED IN #6 ABOVE.**

**STUDENT'S DEPENDENT SUPPORT INFORMATION – (must be completed by a sponsor providing support for the student's dependents in addition to any amount in #6 above)**

8) I certify that I am able and do commit to provide support for the following individuals who will accompany \_\_\_\_\_

(name of student)

date of birth \_\_\_\_\_ citizenship \_\_\_\_\_ to the United States as his/her dependents.

\_\_\_\_\_ with a minimum of \$(U.S.) 4,950 for student's spouse per year.

(name of spouse as in passport)

\_\_\_\_\_ with a minimum of \$(U.S.) 3,800 for each minor child per year.

(name of each minor child as in passports) – use an additional sheet if more than one child

Total support for all dependents will be \$(U.S.) \_\_\_\_\_ each year until (date) \_\_\_\_\_.

**VERIFICATION OF SPONSOR'S SIGNATURE (Notary or other official who knows the sponsor)**

**This Affidavit must be signed in the presence of a notarizing official.**

I affirm that the contents of this affidavit signed by me are true and correct, and I authorize the release of the documentation presented to the student and/or U.S. government official if requested.

\_\_\_\_\_  
(name of sponsor signing this affidavit) (signature of sponsor) (date)

\_\_\_\_\_  
(printed name and title of official verifying the sponsor's signature) (signature of official) (date)