Minneapolis College of Art and Design **FINANCIAL CERTIFICATION FORM**

All international students who hold an F-1 Student Visa or who plan to apply for one must complete this form accurately and return it with the application for admission. We reserve the right to withhold the I-20 until the certification of required funds is received.

A student coming to the United States with insufficient funds to cover expenses will encounter many difficulties. If funds are exhausted after the student enrolls, the College and the U.S. Immigration Service could require that the student's registration be cancelled and that the student return to the home country.

Please Note: Students on an F-1 Student Visa are not allowed to work off-campus and must attend school fulltime during the regular academic year.

Estimated international <u>BFA</u> student expenses for the 2023/2024 **academic** year (August-May):

Tuition	\$43,374
MCAD Fees	\$450
Computer Purchase	\$2000
Books & Supplies	\$3,640
Room,on-campus	\$7610
Board,on-campus	\$3300*
Health Insurance	\$2,400**
Visa fees	\$510**
Personal expenses	\$1260
Total	\$64,544***

*Meal card + groceries **Subject to change

** This estimate does not include owning or

maintaining a car or travel/transportation

Student Name:				
Given/Fir	st name Family,	/Last name	Middle name (if any)	Preferred/English nan
Country of Citizenship	Country of Birth	Date of Bi	rth (month day, year) ex: F	February 8, 1995
Current Home/Mailing Addre	SS		Country	Zip Code
Address to send your I-20 to	(if different from above	e) * must be a t	ole to receive UPS packag	jes here
Home Phone Number			Prono	uns
Current or school Email Addr	ess	Alternative E	mail Address (yahoo, gmai	I, hotmail), etc
Are you currently studyin is your SEVIS number?	ng on an F-1 visa? I	f yes, what	N00	
Degree Program:		_ (BFA or BSc)		
Intended Major: Entrepreneurial Studies, Film Photography, Print/Paper/Bo	making, Fine Art Studi	io, Furniture De	esign, Graphic Design, Illus	tration,
DOES YOUR COUNTRY RES	STRICT FUNDS FROM	ABROAD FOF	EDUCATIONAL PURPOS	ES?
Check: NO YES If	/es, explain:			

Student's Source of Funds

	Year ONE	Assured support	Year TWO projected	support			
Student's Personal Savings Amount in US dollars							
Name of Bank	\$	\$					
Parent's and/or Sponsor's contribution	\$	\$		_			
Your Government Name of Agency	\$	\$		_			
Other or MCAD Scholarship TOTAL	\$	\$		-			

These totals should equal or exceed **the above amount** – MCAD's estimate of expenses for 1 year (see front)

IMPORTANT: Please attach a signed letter by the bank official showing funds for each of the sources indicated above and complete the appropriate sections below. If you have a scholarship, award or government sponsorship, please attach an official letter from the source verifying the terms, conditions and duration of the award, etc.

Student Statement:

- I certify that the above information is accurate and complete and that I will notify MCAD of any change in my financial circumstances.
- I will have sufficient funds in U.S. currency available to me for each academic year (up to twelve months) to cover the educational and living expenses, plus adequate funds for my travel to and from the U.S. and for personal expenses.
- If I remain in the U.S. during summer break, I will have sufficient funds to cover living and travel expenses for myself. If I attend summer school, I will have sufficient funds to cover tuition and fees, books and supplies.
- These funds can and will be provided during my entire period of studies by the individual parent or sponsor noted below or by the agency noted on the attached verification bank loan or government grant statement.
- I can arrange to have necessary funds transferred to the U.S. and available to me prior to final registration each semester.
- I understand that my educational and living expense will increase between 3 5% each year at MCAD, and I will be prepared to increase the amount of my sponsorship each year. I realize that no additional scholarship, U.S. or MCAD financial aid or work-study will be available after I enroll.

Student Signature:

Parent's/Sponsor's Statement:

- I certify that the above information on my financial situation is accurate and complete and that I will guarantee financial support to the student named on this Financial Certification Form while he/she is studying and MCAD.
- I can and will provide the above-indicated funds needed in accordance with the stipulations of this MCAD Financial Certification Form. I realize that the educational and living expenses at MCAD will likely increase each year and am prepared to increase the amount of my sponsorship accordingly each year.

Parent or Sponsor Name:		
Parent or Sponsor Address:		
Parent or Sponsor's telephone numbers: (home)		
(cellular or mobile)	(Email)	
Parent or Sponsor's relationship to student (for example father,	mother, uncle, aunt, church sponsor, etc.):	
I do hereby certify that I am the parent or sponsor of the above	mentioned student. I am employed at/by:	
Parent or Sponsor's Signature:	Date:	
Use Adobe	Use Adobe "fill & sign"	
Submit completed form to: Student Affairs		

student_affairs@mcad.edu