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 full-time during the regular academic year.

Student Name:

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

Total	\$64 034**
Personal expenses	\$1260
Visa fees	
Health Insurance	\$2,400**
Board, on-campus	\$3300*
Room,on-campus	\$7610
Books & Supplies	\$3,640
Computer Purchase	\$2000
MCAD Fees	\$450
Tuition	\$43,374

^{*}Meal card + groceries

Given/First	name Family/	Last name	Middle name (if any)	Preferred/English na
Country of Citizenship	Country of Birth	Date of Bi	rth (month day, year) ex: F	ebruary 8, 1995
Current Home/Mailing Address			Country	Zip Code
Address to send your I-20 to (if	different from above	e) *must be at	le to receive UPS packag	es here
Home Phone Number			Prono	uns
Current or school Email Address	;	Alternative E	mail Address (yahoo, gmai	I, hotmail), etc
Are you currently studying is your SEVIS number?	on an F-1 visa? I	f yes, what	N00	
Degree Program:		(BFA or BSc)		
Intended Major: Entrepreneurial Studies, Filmma Photography, Print/Paper/Book	king, Fine Art Studi	o, Furniture De	esign, Graphic Design, Illus	tration,
DOES YOUR COUNTRY RESTR	RICT FUNDS FROM	ABROAD FOF	EDUCATIONAL PURPOSI	ES?
Check: NO YES If yes	, explain:			

^{**} Subject to change

^{**} This estimate does not include owning or maintaining a car or travel/transportation

Student's Source of Funds

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

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.

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

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:	Date:
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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: (h	nome)			
(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 "fill & sign"			

Submit completed form to: Student Affairs student_affairs@mcad.edu