F-1 International Student Affidavit of Support



International applicants who plan to attend Illinois Central College on an F-1 visa must complete this form in full proving one year of funding before an I-20 Certificate of Eligibility will be issued. However, be sure to consider the cost of your entire program when planning to attend Illinois Central College. This form will be used during your visa interview and must be available to show to the customs officer at the U.S. border.

Estimated Cost of Attendance – 2022-2023

Full-time International Student

	On-Campus Housing	Off-Campus Housing
Tuition and Fees	\$4,960	\$12,480
Books and Supplies	\$1,600	\$1,600
Housing	\$9,900	\$9,900
Transportation	\$2,250	\$2,250
Health Insurance	\$1,600	\$1,600
Misc. and Personal	\$3,000	\$3,000
Total Expenses	\$ 23,310	\$30,830

^{*} Please note that these figures are estimates for one academic year and are subject to change without notice. International F-1 students residing in on-campus housing are eligible for in-district housing calculated at one credit hour (x) \$155.00.

PART 1: TO BE COMPLETED BY STUDENT

Surname/Family Name:			
Given Name/ First Name:			
Birth Date (MM/DD/YYYY):			
Personal Amount of Funding (USD):			
Approved Scholarship, Grant, Award:			
Foreign Address:	Ci	ty:	
Province/Territory:	Postal Code:	Country:	
Email Address:	Telepho	ne:	
U.S. Address:	City: _		
Province/Territory:	Postal Code:	Country:	
Email Address:	Telephone:		

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Student Certification

I certify that the information provided on this form and all other supporting documentation is correct and complete. I understand that any false information regarding this Affidavit of Support may result in Illinois Central College revoking my acceptance and may jeopardize my future visa status. I also understand that I am required to have sufficient funding for the entire length of my program at Illinois Central College, even if I only show proof of funding for one academic year on this statement.

Student's Printed Name:					
Signature (electronic or typed signatu	res not accepted):	Date:			
PART 2: TO BE COMPLETED BY THE SPONSOR(S)					
Sponsor #1 Certification – if ap	plicable				
Sponsor I Full Name:					
Sponsor I Amount of Funding (USD):				
Address:	City:				
Province/Territory:	Postal Code:	Country:			
Email Address:	Telephone: _				
Central College revoking the stud Sponsor's Printed Name:	lent's acceptance and may jeopard	ding my support may result in Illinois dize the student's future visa status.			
Relationship to Student:		Date:			
Sponsor #2 Certification – if ap	plicable				
Sponsor II Full Name:					
Sponsor II Amount of Funding (USI)):				
Address:	City:				
Province/Territory:	Postal Code:	Country:			
Email Address:	Telephone:				

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I guarantee that the sum of \$	(in USD) is available for the above-named
	(in USD) is available for the above-named fy that the information provided regarding my support is information regarding my support may result in Illinois
Central College revoking the student's acceptance	and may jeopardize the student's future visa status.
Sponsor's Printed Name:	
Signature (electronic or typed signatures not accepted):	
Relationship to Student:	Date:
PART 3: TO BE COM Bank Certification	IPLETED BY BANK OFFICIAL
	tion provided by the sponsor(s) listed on this form and that their bank account with our company. I certify that the
Bank Official's Name and Title	
Signature (electronic or typed signatures not accepted):	
Bank Name:	Date:

(Insert bank stamp or seal here)