Financial Declaration
International Graduate Exchange Students (*Fall Term*) - Rice University

Under U.S. law, the university must have certain information, including evidence of adequate financial resources, before issuing a DS-2019. Please complete this form and return it with the requested documentation when accepting Rice's offer of admission. Keep copies of all financial documents submitted, to present to the U.S. consulate/embassy when obtaining a visa, and possibly to US immigration inspectors upon arrival to the U.S. ***Documents submitted to Rice University will not be returned to you.***

Name (*as written on passport-**attach copy***)_____
Family *First* *Middle*

Date of Birth_____ Place of Birth_____
Month/Day/Year *City* *Country*

Country of citizenship_____ Country of legal permanent residence_____

Present occupation_____Name of school or business_____

Email Address _____Coming to the U.S. ☐ Alone ☐ With spouse ☐ With children

What was your last position in your home country (country of citizenship)? (Example: undergraduate student)

_____

Type of visa desired: ☑ J-1 Exchange Visitor Visa ☐ Other, currently in _____ visa status

☐ I have ☐ I have not been enrolled previously in an educational institution in the U.S.

Institution_____ Degree_____

Date entered_____ Date departed_____ Still in U.S.?_____

Proposed Field of Study_____

Estimate of expenses for fall 2017:

Tuition&fees	$22,727
Books and supplies	$600
Room and board	$7,250
Transportation	$400
Health insurance (estimated Rice Plan)	$980
Personal	$775
TOTAL	$32,732**

*NOTE: All expenses are estimates and are subject to change, based on policy changes and cost of living increases.

** If you are bringing dependents, please estimate an additional $4000/dependent.

Financial Resources:

SOURCES OF FUNDING (fill in the table below with the amounts and provide the appropriate documentation of your financial resources to fund you for the academic year). All bank statements need to be in original language and officially translated into English and converted into US dollars.	**FUNDING AMOUNT**
Rice Tuition Waiver	**US $**
Personal Funds (studentôs own money) ï attach official bank statement(s)	**US $**
Family Funds ï attach bank statement(s) **and** signed letter of support from family member that **includes** the sponsorôs relationship to you (parent, brother, uncle, etc.)	**US $**
Government Source(s) ï please specify source **and** attach proof of support	**US $**
Other Sponsor ï attach bank statement(s) **and** signed letter of support from sponsor that **includes** the sponsorôs relationship to you (family friend, employer, etc.)	**US $**
	US $
	US $
TOTAL (must equal or exceed anticipated expenses **listed above**)	**US $**

Foreign Address: (This is your physical permanent address in your home country – no post office box or university address)

_____

Street

_____

City *State/Province* *Country* *Postal Code*

Mailing Address: (if different from address above – please enter the address where you would like to receive your immigration documents)

_____

Street

_____

City *State/Province* *Country* *Postal Code*

***Important Note*: If you will be accompanied by dependents, please give their names, date of births, countries of birth, city of birth and countries of citizenship, so they can be issued appropriate documentation.**

Dependents information: (please complete the following information for each of your dependents that will be accompanying you to the U.S.)

Dependent #1: ☐ Spouse ☐ Child ☐ Male ☐ Female

Name (***as written on passport-attach copy***)_____
Family *First* *Middle*

Date of Birth_____ Place of Birth_____
Month/Day/Year *City* *Country*

Country of citizenship_____ Country of legal permanent residence_____

Personal email address _____

Dependent #2: ☐ Spouse ☐ Child ☐ Male ☐ Female

Name (***as written on passport-attach copy***)_____
Family *First* *Middle*

Date of Birth_____ Place of Birth_____
Month/Day/Year *City* *Country*

Country of citizenship_____ Country of legal permanent residence_____

Personal email address _____

I certify that the above information is correct, and I am supplying supporting documentation required by U.S. Immigration regulations in order to obtain an entry document. I understand that tuition, fees, and health insurance must be paid prior to registration at Rice University, and that Rice cannot be held responsible for unforeseen difficulties that alter my financial situation.

_____ _____
Signature **Date**

For questions about this form, please contact Irena Aleksic at irena.aleksic@rice.edu or oiss@rice.edu, or 713-348-6095.

Revised 04/06/2017