

Financial Declaration 2017-2018 International Graduate Students

Master of Accounting
Jones Graduate School of Business
Rice University

Under U.S. law, the university must have certain information, including evidence of adequate financial resources, before issuing an I-20 form (for a student F-1 visa) or a DS-2019 (for an exchange visitor J-1 visa). 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, as you will need to present the same information to the U.S. consulate or embassy when obtaining a visa, and you may be requested to show it again when you pass through Immigration inspection coming into the U.S.

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

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 on page 2 of this form, so they can be issued appropriate documentation.

Type of visa desired: F-1 Student Visa J-1 Exchange Visitor Visa

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.? _____

Estimate of expenses for one year at Rice, 2017-2018:

| | |
|-------------------|-------------------|
| Tuition | *\$51,500 |
| Academic Fees | \$540 |
| Additional Fees | \$878 |
| Computer/Software | \$2,000 |
| Books/Supplies | \$2,400 |
| Room and Board | \$13,275 |
| Transportation | \$2,565 |
| Health Insurance | \$2,575 |
| Personal | \$2,925 |
| TOTAL | **\$78,658 |

NOTE: Fees are estimates based on the 2016-2017 academic year and are subject to change.

*This is the confirmed Tuition for the 2017-2018 academic year.

** If you are bringing dependents, you may wish to 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 at least one year) | FUNDING AMOUNT |
|---|----------------|
| Rice Scholarship or Fellowship - attach letter of award | \$ |
| Personal Funds – attach official bank statement(s) | \$ |
| Family Funds – attach bank statement(s) and signed letter of support from family member that includes the sponsor's relationship to you (parent, brother, uncle, etc.) | \$ |
| Personal Sponsor – attach bank statement(s) and signed letter of support from sponsor that includes the sponsor's relationship to you (family friend, employer, etc.) | \$ |
| Other Source(s) – please specify source and attach proof of support | \$ |
| | \$ |
| | \$ |
| TOTAL (must equal or exceed estimated expenses) | \$ |

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 _____

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

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 _____

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 _____

Dependent #3: 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 _____

Dependent #4: 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 _____