



International Education Programs
 4500 Steilacoom Blvd. S.W.
 Lakewood, WA 98499 USA
 Tel: 253.589.5569 Fax: 253.589.5750
 International@cptc.edu; www.CPTC.edu/internationals

INTERNATIONAL EDUCATION FINANCIAL RESPONSIBILITY VERIFICATION FORM

All international students are required by U.S. Department of Homeland Security (DHS) to prove they have adequate funds to pay for educational and living expenses during their stay in the U.S. In addition to completing the information requested in this form, provide an original official bank statement showing funds are available in U.S. dollars.

TYPE OR PRINT USING BLOCK LETTERS

FAMILY NAME AS PRINTED ON PASSPORT _____	FIRST NAME _____	MIDDLE _____	PREVIOUS LAST NAME _____
<input type="checkbox"/> FEMALE <input type="checkbox"/> MALE DATE OF BIRTH _____ <small>MM/DD/YYYY</small>	COUNTRY OF BIRTH: _____		CITIZENSHIP: _____ NATIVE LANGUAGE: _____

PERMANENT ADDRESS IN HOME COUNTRY: STREET _____
 PROVINCE / CITY / COUNTY _____ COUNTRY _____
 PERMANENT EMAIL: _____ PERMANENT PHONE: _____

YOUR ADDRESS IN U.S. STREET _____ APT# _____
 CITY _____ STATE _____ ZIP CODE _____
 YOUR EMAIL: _____ YOUR PHONE: _____

EMERGENCY CONTACTS: NAME: _____ PHONE: _____
 EMAIL: _____ RELATIONSHIP: _____

ASSURED SUPPORT FIRST YEAR: \$ _____

SOURCE OF FUNDS

Self-Support: Attach a notarized statement from a bank official on the bank stationery verifying the amount you indicate.

Parent or Individual Sponsor: Attach a statement from the guarantor's bank verifying his/her ability to provide you with the funds you indicate. The guarantor must also sign the certification portion below.

Government or Other Sponsoring Agency: Enclose with this form a signed copy of your letter of award, specifying the current date, dollar amount, and the exact starting date and length of grant.

Other: Specify _____. Enclose with this form a signed affidavit from an authorized person to certify the accuracy of this entry.

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CERTIFICATION OF SOURCE OF FUNDS AND AMOUNTS. This is to certify that I have read the information furnished on this form, that it is a true and accurate statement, and that the funds are available in U.S. currency and will be provided as required. I UNDERSTAND THE ABOVE VERIFICATION AND DECLARE THAT THE INFORMATION I HAVE PROVIDED ON THIS FORM IS TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE.

NAME – PRINT IN BLOCK LETTERS _____ SIGNATURE _____ DATE _____

RELATIONSHIP TO STUDENT: PARENT RELATIVE OTHER, SPECIFY: _____

GUARANTOR'S PERMANENT ADDRESS: _____

TELEPHONE: _____ EMAIL: _____