



Hofstra University
 Office of Graduate Admission
 126 Hofstra University
 Hempstead, NY 11549-1260 USA
 graduateinternational@hofstra.edu
 Phone Number: +1-516-463-4723
 Fax Number: +1-516-463-4664

2017 GRADUATE FINANCIAL VERIFICATION FORM

I-20 Application Form

DIRECTIONS: Please complete the following information and submit electronically to graduateinternational@hofstra.edu. You must include a copy of your passport identification page and proof of financial support. Documentation may be submitted by fax to +1-516-463-4664 or sent by courier service to Hofstra University, Office of Graduate Admission, 105 Memorial Hall, 126 Hofstra University, Hempstead, NY 11549-1260 USA.

PLEASE TYPE OR PRINT CLEARLY.

Term (check one): Fall (September) Spring (January) Year _____

Course of study: _____

Degree (check one): MA MBA MFA MHA MPH MS MEd
 EdD PhD PsyD Adv. Cert. Cert. PD ELP (conditional admission)

PART I: Personal Information

Sex assigned at birth: Male Female

If you would like the opportunity, we invite you to share more about your gender identity below:

Additional Information:

Federal guidelines mandate that we collect data on the legal sex of all applicants. Please report the sex currently listed on your birth certificate. If you wish to provide more details regarding your sex or gender identity, you are welcome to do so in the Additional Information section.

Please enter your name exactly as it appears in your passport. Attach a copy of your passport identification page.

Name in Passport: _____
Last/Surname First/Given Name Middle Name(s)

Date of Birth: _____ Email: _____
Month/Day/Year

Country of Birth: _____ Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Permanent Address in Home Country (where you live, not a post office box):

Street _____
 City _____ State/Province/Territory _____
 Postal Code _____ Country _____

Address in the United States (leave blank if not applicable):

Street _____
 City _____ State _____ ZIP Code _____

FOR OFFICIAL USE ONLY:	
PROGRAM _____	FUNDS _____
SEMESTER _____	AWARD _____

PART II: If you are currently in the United States, please complete Part II. If not, skip to Part III.

What is your immigration status? (Check one.)

 F1 current/former Hofstra student

- What is your SEVIS ID number? N_____
- Are you changing your degree level? Yes No

 F1 student from another university

- What is your SEVIS ID number? N_____
- Prior university _____
- Last date of attendance _____
- If you are currently studying in the United States and are in possession of a valid I-20, you must complete a "school transfer" procedure. Information describing the F1 school transfer procedure is posted on our website at hofstra.edu/F1Transfer. PLEASE READ this information carefully to ensure a seamless transfer from your current school to Hofstra; details apply to students currently on holiday from U.S. schools between academic terms.

 Another status: _____

- Do you plan to change to an F1? Yes No
- Before we issue your Form I-20, we must advise you. Please email graduateinternational@hofstra.edu to make an appointment with a graduate admission dean.

Do you plan to travel outside the United States before school starts?

- Yes** Tell us how you would like to receive your Form I-20 in Part III.
IMPORTANT: F1 transfer students must use a Form I-20 issued by Hofstra University to return to the United States to begin an academic program at Hofstra.
- No** Tell us how you would like to receive your Form I-20 in Part III.

PART III: How do you prefer to receive your Form I-20?

Mail: Your Form I-20 will be sent via FedEx Express to the name and address you indicate below. Print your name and address in English, exactly as it should appear on the envelope. FedEx Express cannot ship to a post office box.

Full Name:
Street 1:
Street 2:
City/State/Province:
Postal Code/Country:
Phone:

Hold for pickup by: Name: _____

Phone: _____ Email: _____

Note: Picture ID must be presented at pickup.

PART IV: Dependent Information

Are any dependents* accompanying you to the United States? Yes No

*Only your spouse and minor children (under age 21) may be included as family members (dependents). Please provide a photocopy of a valid passport identification page for each dependent and additional proof of financial support in the amount of US \$10,000 per year per dependent.

Relationship: Spouse Child

Gender: Male Female

Name in Passport: _____
Last/Family Name *First/Given Name* *Middle Name(s)*

Date of Birth: _____
Month/Day/Year

Country and City of Birth: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Relationship: Child

Gender: Male Female

Name in Passport: _____
Last/Family Name *First/Given Name* *Middle Name(s)*

Date of Birth: _____
Month/Day/Year

Country and City of Birth: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Please photocopy this section for additional dependents.

PART V: Statement of Financial Support

Students must prove they have the means to cover the cost of studying and living in the United States for the full length of their program of study. Hofstra requires documentation showing readily available, or "liquid," funds (savings or certificates of deposit – no stocks, bonds, or securities) for the first year.

Expenses:

The following is an **ESTIMATED** cost for an average student for one academic year (9 months) of study based on the current year tuition rates for the September and January semesters. Please keep in mind that this is an estimate, and costs may vary depending on the number of credits taken within any particular semester and personal living expenses.

List of Expenses for the 2016-2017 Academic Year

Estimated 2017-2018 rates will be available on March 1, 2017. Rates typically increase an average 4.5 percent.

The expenses listed below **do not** include the summer (June-August) or winter (January) sessions.

	Zarb School of Business (MBA – 41-48 credits)	Zarb School of Business (MS – 30-33 credits)	All Other Programs
Tuition and fees	\$31,402 – 24 credits/year	\$23,404 – 18 credits/year	\$22,900 – 18 credits/year
Room/Housing (residence hall)	\$14,520	\$14,520	\$14,520
Board/Meals (Level 5 plan)	\$4,100	\$4,100	\$4,100
Other Expenses:			
Health Insurance	\$1,371	\$1,371	\$1,371
Books and Supplies	\$1,000	\$1,000	\$1,000
Incidentals, including Transportation	\$3,224	\$3,224	\$3,224
One year total (<i>must be liquid funds</i>)	\$55,617	\$47,565	\$47,115

This list provides basic information and is not a complete list of fees. For the full tuition and fee schedule, visit hofstra.edu/tuition. Tuition and fees are subject to change at any time. Individual student costs may vary, depending upon the housing option and dining plan selected.

All I-20s are issued for a length of two years for a master's program and five years for a doctoral program.

Support: How will you be funded every year?

Funding may come from multiple sources. Each source must provide documentation. Please tell us your source(s) of support and the promised amount available to you each year. Remember that rates typically **increase 4.5 percent per year**.

Source	Amount
Personal funds Amount available to me from my own resources every year:	
Funds from Hofstra University (<i>per year; terms and conditions apply for scholarships</i>) Type of scholarship: <input type="checkbox"/> Academic <input type="checkbox"/> Athletic <input type="checkbox"/> Graduate Assistantship If unknown, leave blank and continue. Academic scholarships are noted in official letters of acceptance.	
Cash funds from a sponsor Amount to be given to me every year: Sponsor's name:	
Cash funds from a sponsor Amount to be given to me every year: Sponsor's name:	
Government or private institution scholarship:	
The total amount available to me every year of study: (<i>estimated average annual expenses</i>)	

Documentation:

Copies of all official financial documents must be in English and dated no more than three months prior to the submission of this form. Amounts preferred to be listed in U.S. dollars. Documentation may be submitted electronically; however, Hofstra reserves the right to request original documentation if necessary to determine financial capability.

Please note: U.S. immigration law severely restricts off-campus employment for F1 students. Please do not expect to work off campus to help pay your University and personal expenses.

The following documents are attached to prove my funding:**Personal Documents (if you will support yourself):**

- Bank/asset statements (dated in the last three months)

Cash Sponsor's Documents:

- Sponsor's Promise of Cash Support (Part VI)
- Bank statements (dated in the last three months). Each owner of the account must complete a separate Sponsor's Promise of Cash Support.

NOTES:

1. Bank statement(s) must indicate the currency of the account.
2. The name of the bank account holder must match the name provided on page 6 (Part VI).

Note: If you will be funded by a government agency, private foundation, or other agency, please attach a copy of an official award letter.

Government or Private Institution Scholarship:

- Scholarship award letter

Free Room and Board Sponsor's Documents (if living off campus):

- Sponsor's Promise of Free Room and Board (Part VI)
- Lease, deed, rent receipt, phone bill (documentation that proves residency)

Total Financial Support in US \$ _____

Certification and Signature (Please read and sign the following statement.)

I hereby certify that all the information on this application form is true and accurate and that the stated funds are available for my educational expenses at Hofstra University. I understand that if I provide false information in this document, Hofstra University will invalidate this I-20, and that I will also be in violation of Hofstra University's *Student Conduct Code*, which can result in suspension or expulsion from Hofstra University.

Student Signature _____ Date _____

Month/Day/Year

PART VI: Promise of Support

Sponsor's Promise of Cash Support

I hereby certify that I am willing, able, and do promise to provide the amount of US \$ _____ per year for the educational expenses of [Name of Student] _____, who is my [Relationship to Sponsor] _____, at Hofstra University.

Sponsor Signature _____

Sponsor Name (Please print.) _____ Date _____

Sponsor Address _____

Sponsor's Promise of Free Room and Board

I hereby certify that I am willing, able, and do promise to provide [Name of Student] _____, who is my [Relationship to Sponsor] _____, with free room and board for the duration of his or her educational program at Hofstra University. Proof of residency accompanies this affidavit of support.

Sponsor Signature _____

Sponsor Name (Please print.) _____ Date _____

Sponsor Address _____

Please photocopy this section for additional sponsors.