



HOFSTRA UNIVERSITY

OFFICE OF GRADUATE ADMISSIONS

I-20 APPLICATION FORM

PART I: PERSONAL INFORMATIONMale Female Name : _____
Last/Family Name *First/Given Name* *Middle Name(s)*

Email: _____

Home Country Address _____
*Street Name*_____
City *State/Province*_____
Country *Postal Code* *Phone Number*

Country of Permanent Legal Residence: _____

Country of Citizenship: _____

Date of Birth: _____ Country of Birth: _____
*Month / Day / Year*Please indicate if you are planning to live : On Campus Off Campus **Part II: Dependent Information if applicable**Please list below your dependents (if any) who will accompany you to the United States. *(Use an additional sheet if necessary)*

Complete Name as on Passport	Relationship	Country of Citizenship	Place of Birth: City & Country	Country of Permanent Legal Residence	Date of Birth mm/dd/yyyy

Part III: If you currently have a valid I-20 from another school please complete this section.

What is your SEVIS ID number? _____

Name of School transferring from _____

*If transferring you must also submit an F-1 transfer form signed by your prior school.

Part IV: Statement of Financial Support

The following is an **ESTIMATED** cost for one year of study based on the current year tuition rates. Please keep in mind that this is an estimate and may vary depending on the number of credits taken within any particular semester.

	ZARB MBA	ZARB MS	*All Other (2 year) Programs
Tuition and fees	\$23,130.00	\$19,030.00	\$19,580.00
Living Expenses	\$12,575.00	\$12,575.00	\$12,575.00
Personal (books, food, transportation)	\$5,262.00	\$5,262.00	\$5,262.00
Total One Year	\$40,967.00	\$36,867.00	\$37,417.00
Total Program	\$81,934.00	\$55,301.00	\$74,834.00

* Additional support is required for those programs longer than 2 years.

You are required to provide proof of financial support in liquid funds for the first year only. However, you must demonstrate the ability to pay all of the expenses for the entire length of your program. Copies of all financial official documents must be in English. Please note that since you will hold a student visa, you cannot rely on employment to help you pay your university and personal expenses.

If you are a married student and plan to bring your spouse and/or children, additional funds must be certified:
At least **\$10,000.00** per year for each dependent must be available.

Please indicate below how you will support yourself for the first year of your program:

Source of Support:	Annual Amount in U.S. Dollars:
Personal Savings (Official bank statement)	_____
Hofstra Scholarship (Official award letter)	_____
Cash funds from a sponsor (Signed affidavit and an official bank statement)	_____
Cash funds from a second sponsor (Signed affidavit and a bank statement)	_____
Cash funds from a third sponsor (Signed affidavit and a bank statement)	_____
Potential funds from a sponsor (Official income letter from employer)	_____
Total financial support provided (Total must equal funds for the length of program)	_____

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

I hereby certify that all of 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 Code of Student Conduct, which can result in suspension or expulsion from Hofstra University.

Student's Signature _____ Date _____

Part V: Sponsor's Affidavit of 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. Bank

statements or other proof of my financial resources accompany this affidavit of support.

Sponsor's Signature _____

Sponsor's Name (printed) _____ Date _____

Sponsor's Address _____

Mailing address for your I-20:

Student name

Street name

City

State/Province

Country

Postal Code

***Please note that we cannot mail any I-20's to a P.O. Box. You must list a residence or street address only.**