



Section 1: Student Information (Enter information exactly as it appears on your passport). Please attach a copy of the photo page of your passport.		
Last (Family) Name:		First (Given) Name:
Middle Name (Include Initials):	Birthdate:	Country where you presently live:
City of Birth:	Country of Birth:	Country of Citizenship:
Email Address:		
Address in Home Country (Required by SEVIS)		
Street Address:		
City:		State/Province/Region:
Country:		Postal Code:
Phone:		
Address for delivery of I-20 (CANNOT USE A POST OFFICE BOX). If same as home country address, write "same".		
Street Address:		
City:		State/Province/Region:
Country:		Postal Code:
Contact Phone:		
If living off campus when arriving at Cumberland, list your local address if known:		
Street Address 1:		
City		State and Postal Code:
Local Phone if known:		
Miscellaneous Information:		
Will you be participating on a Cumberland Athletic team? ___ Yes ___ No If yes, which sport:		
Are you presently living in the United States? ___ Yes ___ No		
If you currently hold an F-1 Visa, what institution issued your I-20?		
Does your government impose restrictions on exchange/release of currency for study in the US? ___ Yes ___ No If so, please describe:		
Do you have a source of emergency funds after you arrive in the US? ___ Yes ___ No If yes, please name the source:		
For master's degree students: will you be working as a Graduate Assistant? For which department/individual?		

Section 2: Sources of Financial Support

As an international student, you must provide proof of available funding to cover estimated academic and living expenses for one academic year. You may use any combination of funding organizations and sponsors. Each individual or organization must complete the appropriate portion of Section 2 of this form and turn it in with the documentation listed below. You can make a copy of this page as needed for additional sponsors. Fill in only the sections on the form that apply to your funding for Cumberland.

For Section 2A or 2B below, one of the following 2 items is required:

- A bank statement in the name of the student, parent, or appropriate sponsor dated within six (6) months of the date on this form, translated into English, and showing the equivalent currency in U.S. dollars.
- A letter from a bank official written on bank letterhead in English, including the following:
 - The full name of the account holder.
 - Balance available to pay for student expenses.
 - The date the account was opened.
 - Signed and dated by the bank official.

For Section 2C, submit a scholarship or grant award letter or a financial guarantee from the funding agency in English, signed and dated by an official of the funding agency.

Initially accepted students who fail to complete the Certificate of Financial Responsibility or fail to prove the ability to pay for their schooling will not receive the I-20 document necessary to apply for a Visa.

Section 2A: Personal funds	
Complete this section if you are paying for all or a part of your expenses. Submit this worksheet with a copy of your own bank statements.	
Total funds you will be contributing:	
Signature:	Date:
Section 2B: Family or private sponsor funds	
If an individual other than yourself is sponsoring you for all or part of your expenses, complete this section and submit their supporting bank statements.	
Sponsor Name:	
Relationship to applicant:	Phone number:
Sponsor address:	
Sponsor Email Address:	
Amount of sponsorship, i.e., total funds sponsor will provide applicant:	
Total in US Dollars: _____ Duration of support (years): _____	
Are you providing support for applicant's spouse and/or children if applicable? _____ Yes _____ No	
Total in US Dollars: _____ Duration of support (years): _____	
Sponsor Signature:	Date:

Section 2C: Complete if you have a non-Cumberland scholarship, loan, grant or other funding agency money	
If you have a scholarship from an organization other than CU (such as your government or employer), complete the following.	
Name of scholarship or funding agency	
Agency representative name and title:	Phone number:
Address:	
Email Address:	
Amount of funding: Total in US Dollars: _____ Duration of support (years): _____	
Which expenses is the funding designated to cover: ____ Tuition and fees ____ Health insurance ____ Living expenses ____ Spouse/children expenses	
Agency Representative Signature:	Date:

Currently enrolled Cumberland University students who have a change in any of this information including their sponsor, funding or scholarship, need to complete a new form and submit it with a new bank statement or letter of guarantee so that an accurate I-20 can be issued.

Applicant's Declaration

I certify that the information on this form is accurate and complete. I understand that any misrepresentation may be cause for denying or revoking admission to Cumberland University. I understand that I am ultimately responsible for all anticipated yearly expenses for the length of my stay in the United States.

Applicant Signature

Date (MM/DD/YR)