

Please attach a recent photograph in this space

Spring, Summer and Fall 2006 Applications

NOTE: This form is not an application for admission; it is **required** supplementary information. Form I-20 or DS-2019, which is required for your visa, cannot be issued until you have been admitted to the University of Florida **and** you have completed and returned this form to the UF International Center:

P.O. Box 113225, 123 Grinter Hall, Gainesville, Florida 32611-3225, USA.
phone 352-392-5323 x702 and fax 352-392-5575; more information at www.ufic.ufl.edu.

- Previous versions of the form (refer to dates above) will not be accepted.
- Unsigned forms will not be accepted.
- Proof of funds cannot be more than one year old when the I-20 is processed.
- Items with (*) next to them must be filled out or the form will not be accepted.

Please Type

(As it appears on your passport) *family name *first name middle name suffix (i.e., Jr, II)

*Date of birth: _____ month/day/year *UFID: _____ *Expected start date: _____ or (check one) Spring06 Summer06 Fall06

*Country of birth: _____ *City of birth: _____

*Country of citizenship: _____ *Gender: _____

Country of permanent residence: _____ Marital status: _____

***Permanent Foreign Address (in your home country)**

*Address: _____

*City: _____

Province/State: _____ Postal code: _____

*Country: _____ Phone: _____

*Email: _____

Emergency contact: _____ Relationship: _____

Emergency contact phone: _____ Emergency contact email: _____

***Current Address**

*Address: _____

*City: _____

Province/State: _____ Postal code: _____

*Country: _____ Phone: _____

If you are in the U.S.A., what is your visa type? (F-1, J-1, etc.) _____

Indicate your SEVIS ID number (located on the top right if I-20/DS-2019): N _____

*What is/was your occupation in your home country? _____
student, professor, engineer, etc.

***Provide this information about each dependent you plan to bring with you:**

Last Name	First	Relationship (Spouse/child)	Gender (M or F)	Date of Birth	Country of Birth	Country of Citizenship	Visa Type
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*Applicant's Name: _____ *Date of birth: _____ *UFID: _____

The university requires proof of financial support for the first year of study: Graduate \$34,340; Undergraduate \$30,205. An additional \$3,000 is required for your spouse and \$1,500 for each child. These estimates are subject to change and do not include travel expenses. **Make copies of this form for your records** and for use at the United States Consulate.

All Applicants and Sponsors Must Complete This Section (Use a new page for each sponsor, including yourself; excluding departments.)

I have read the information and I believe all information is true and accurate, and the funds are available.

*Funding provided by (signature): _____ *Date: _____
month/day/year

*Name or title of funding party (print): _____

*Relationship of funding party to applicant: _____

Address: _____

Sources of Financial Support. Please provide the funding information that applies to you.	AMOUNTS IN U.S. DOLLARS First Year
<p>1. Personal and/or Family Savings Verification of funds, such as a bank statement (with name of sponsor, date, amount and type of currency) is required, or the bank must complete the section at the bottom of the page.</p>	\$ _____
<p>2. Government Sponsor A copy of the signed letter certifying sponsorship is required. The letter must list what is covered, include the amount of the monthly stipend and identify the type of visa required.</p> <p>_____</p> <p>Print name of agency _____ Type of visa (F or J required) _____</p>	\$ _____
<p>3. University of Florida Assistantship/Fellowship (Dept. does not need to complete section above.) A copy of the UF department's letter must be mailed/faxed to the International Center.</p>	\$ _____
<p>4. Scholarships A copy of the award letter is required.</p>	\$ _____
<p>5. Other: Specify below and enclose a signed certification.</p> <p>_____</p> <p>_____</p>	\$ _____

Bank and Sponsor's Certification of Funding Sources

(You must submit a bank official's signature with the stamp/seal of the bank or submit a bank statement/letter verifying funds.)

I have read the information the applicant has provided. I believe all information is true and accurate, and the funds are available.

Bank official's signature: _____ Title: _____

Bank official's name: _____ Date: _____
month/day/year

Name and address of bank: _____



(Bank's stamp or seal)

The information I have provided here is accurate and complete. I will not need additional financial support from the University of Florida. If any information changes before I enroll at the university, I will notify the UF International Center immediately. I also understand that making false or fraudulent statements within this Certificate of Financial Responsibility could result in disciplinary action.

*Applicant's signature: _____ *Date: _____
month/day/year