International students must prove the availability of funds to meet all estimated expenses for the duration of the educational program. This applies to new students as well as those wishing to transfer to Liberty and Liberty students seeking to enroll in a new program.

The following three (3) sections must be completed in their entirety (or similar documents must be submitted) for the student to be considered for admission:

1. Student Information
2. Parent/Sponsor Certification
3. Official Bank Certification (completed by bank/financial institution or sponsor must provide a current bank statement indicating sufficient funds for the first year of study). If a bank statement is provided please black out account number prior to scanning and emailing/faxing to us.

The Affidavit and Bank Certification documents must:

✓ Prove availability of sufficient funds to meet estimated expenses according to the table below
✓ Be completed and signed by the sponsor and bank official (bank seal required)
✓ Be no more than six months old

NOTE: Providing false information may jeopardize a student’s visa status and/or admissions and financial aid status at Liberty University.

### Estimated Expenses (Academic Year 2017-2018)*

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>All Master's Degree Programs (Non-Seminary)</th>
<th>Seminary Programs</th>
<th>Biomedical Sciences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>9,180</td>
<td>5,500</td>
<td>12,100</td>
</tr>
<tr>
<td>Fees</td>
<td>1,060</td>
<td>1,160</td>
<td>1,060</td>
</tr>
<tr>
<td>Room and Board**</td>
<td>10,000</td>
<td>10,000</td>
<td>10,000</td>
</tr>
<tr>
<td>Books + Supplies</td>
<td>700</td>
<td>700</td>
<td>700</td>
</tr>
<tr>
<td>Personal Expenses</td>
<td>1,000</td>
<td>1,000</td>
<td>1,000</td>
</tr>
<tr>
<td>Health Insurance***</td>
<td>1,142</td>
<td>1,142</td>
<td>1,142</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$23,082</td>
<td>$19,502</td>
<td>$26,002</td>
</tr>
</tbody>
</table>

*All figures are given for informational purposes to assist applicants with budget planning. All figures are estimates and are subject to change.

**This total is an estimate, as off-campus housing expenses will vary considerably.

***This total is an estimate. Health insurance is mandatory for all international students. Student health insurance fees are added to the student’s bill each semester of enrollment. Additional health insurance must be purchased for each dependent.

---Add $4,000 for summer expenses if you plan to remain in the U.S. during the summer months.
---Add $5,000 per year for spouse and/or each child to the above totals.

1. **Student Information:**

Name: ____________________________________________

Student ID: ______________________________________

Date of Birth: ____________________________  E-mail Address: _______________________________

I, ___________________________________________, the student, have read and approve the statements on the back of this form.

Under the conditions described on the back of this form, I expect to be able to complete my studies without help from any other source and without seeking additional scholarship after my arrival on campus. I understand that no additional scholarship will be awarded after my arrival on campus.

Student Signature: ____________________________  Date: ____________________________
2. Affidavit of Financial Support:

Parent/Sponsor Certification:

Student Name:  
Please Print  First  Middle  Last

Sponsor Name:  Relationship to Applicant:  
Please Print  First  Middle  Last

Street Address:  

City, State, Country:

Sponsor’s Phone Number:  

I, ___________________________, the sponsor, hereby certify that I have read the information on this form as provided by the applicant, and I am willing and able to provide the above named student with the amount of $__________________ per year, payable in US dollars, to complete his/her studies at Liberty University. I understand that the student is seeking a _________________ degree in _______________ and that ___ years of study are required for completion of the program.  

By signing this document I support this student as he/she applies for a legal visa from the U.S. Department of State. I intend to contribute the specified funds towards this student’s educational expenses for the duration of the degree program indicated. I understand that the student will not be able to earn enough from student employment to pay expenses and that additional scholarship assistance is generally not available after arriving in the US.

Signature of Parent/Sponsor:  Date:  

3. Official Bank Certification:

I certify that the person listed on this form as Sponsor has been a client at this bank/financial institution for ____ years. I certify that to the best of my knowledge and in good faith, this client has the resources to provide the funds indicated on this form, to be used to meet the student’s education expenses at Liberty University. I understand that this certification does not constitute a statement of responsibility on my part or that of the firm or bank I represent.

Name:  Title:  
Please Print/Type  First  Middle  Last

Signature:  Date:  

Bank/Institution Address:  

Place official bank stamp or seal here