

# LIBERTY

## UNIVERSITY.

### FINANCIAL SUPPORT VERIFICATION

International students must demonstrate the availability of sufficient funds to meet all estimated expenses **for one full academic year.**

Submit the following items to be considered for admission:

1. Student Information (completed by student)
2. Statement of Personal Financial Commitment for Study Abroad (completed by one or more sponsors)
3. Official Bank Document (one or more **bank statements** or an **official bank letter** demonstrating that the sponsor has sufficient funds to provide the amount committed in Item 2 above. **If a bank statement is provided, please black out account number prior to sending by email or fax and it must be less than 6 months old from the date on the bank statement.**

**Scholarships:** The total cost for one year of undergraduate studies is approximately **\$38,792**. All undergraduate students are eligible to receive scholarship assistance. The actual amount of scholarship awarded can be determined after all academic documents have been submitted. Scholarships will reduce the amount of funds needed by the sponsor(s). Applicants may contact their admissions counselor for their scholarship amount before this verification document is submitted. (Note: Scholarships require the student to be enrolled in 12 or more undergraduate hours each semester.)

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

#### Academic Year 2018-2019

##### Estimated Expenses

Program	Undergraduate
Tuition	23,800
Fees	1,110
Room (Average Tier)	6,760
Meal Plan	3,780
Health Insurance*	1,142
<b>Sub Total</b>	<b>\$36,592</b>

##### Not included in the payment plan

Books + Supplies	1,200
Personal Expenses	1,000
<b>Grand Total</b>	<b>\$38,792</b>

All figures are estimates subject to change and are given for informational purposes to assist applicants with budget planning. Undergraduate students are eligible for scholarship assistance.

\*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. Health insurance must be purchased for each dependent separately.

**--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.**

**--Add \$14,000 per year for aeronautics major flight fees.**

#### Item 1

 Student information

Name \_\_\_\_\_

Student ID \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

Email Address \_\_\_\_\_

I, \_\_\_\_\_, the student, have read and approved 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 scholarships after my arrival on campus. I understand that I cannot expect additional scholarships to be awarded after my arrival on campus.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Item 2****Statement of Personal Financial Commitment (Parent/Sponsor Certification)**Please print clearly

I \_\_\_\_\_, commit to sponsoring \_\_\_\_\_ during his/her program of study at Liberty University in

\_\_\_\_\_ (Major). My relationship with the student is: \_\_\_\_\_

I understand that the estimated expenses for the first year of study to be approximately \$ \_\_\_\_\_ (USD) and I have that amount in the following account(s):

Bank Name	Bank City and Country	Account Balance	Account Currency
_____	_____	_____	_____
_____	_____	_____	_____

I commit to providing an amount of \$ \_\_\_\_\_ (USD) to student during his/her first year of study and I understand that the student's studies are expected to last for \_\_\_\_\_ number of years.

I am willing and able to continue providing for student during the second and following years through graduation.

My signature below as well as the bank documents included with this statement is my commitment, made in good faith, based on my ability, desire, and intention to sponsor the student named above for the duration of his/her initial program of study at Liberty University. I understand that failure to follow through on my commitment may result in the student being required to terminate his/her studies at Liberty University and/or depart the United States. I understand that if the student fails to maintain full-time enrollment while in the US, he/she falls out of status and faces possible arrest, deportation, and life-time loss of US visa privileges.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Country, Postal Code

\_\_\_\_\_  
Phone number (including country code)

**Item 3****Bank Document**

Please include with this signed document one or more current bank statements (less than 6 months old from the date listed on the statement) or official bank letters documenting the availability of the funds indicated in Item 2 above. Bank statements and letters must indicate the sponsor's name.

All documents must be scanned and emailed at one time to the email address below.

**International Admissions Office**  
**Liberty University • 1971 University Boulevard • Lynchburg, Virginia 24515 Phone**  
**(800) 543-5317 • (434) 592-4118 • Fax (434) 522-0430**  
**www.Liberty.edu • International@Liberty.edu**