



Registrar's Office
Hebrew Union College-Jewish Institute of Religion
Telephone: +1-513-487-3354
Fax: +1-513-848-8321

Financial Certification by International Student

Personal Information: Enter your name below **IN FULL** as it appears on your passport.

Family/Surname: _____

First/Given: _____ Middle: _____

City & Country of Birth _____ Date of Birth _____ Country of Citizenship _____
_____/_____/_____
month day year

Your e-mail: _____ Your telephone: _____

Are you currently in the United States? (check one) ☐ YES ☐ NO

If yes, list visa type or immigration status: _____ (F1, H1B, etc.)

If you are in the U.S. and your visa/immigration status is *not* F-1, you must make an appointment with HUC-JIR's PDSO or DSO in the Registrar's Office for assistance with a change-of-status application before an I-20 can be issued. If you are not eligible for a change of status, the I-20 will only be issued for travel to your home country.

List any dependents traveling with you below or on a separate sheet. Include the following information when appropriate: full name listed on passport, their relationship to you, birthdate, city and country of birth, country of citizenship, and phone number and email address if different from yours.

Mailing Address for I-20 delivery (if needed):

Street Address: _____

City: _____ US State/Province: _____

Country: _____ ZIP/Postal Code: _____

Home Country Address (if different from mailing address):

Street Address: _____

City: _____ US State/Province: _____

Country: _____ ZIP/Postal Code: _____

Funding Information: The total support for first year of study must be documented and available. The support necessary for subsequent years of study must be reasonably attainable and documented through bank statement letters, employment letters, tax returns, investments, etc. Employment/salary letters and investments are the most reliable sources of support. .

The total amount of money that I have available for each academic year of study is \$ _____.

Personal funds: \$_____ Attach bank statements in the student's name, sufficient for all years of study, not just the first year.

Sponsor(s): \$_____ Sponsor(s) must complete separate Affidavit of Sponsorship **below**.

Funds from HUC-JIR: \$_____ Type(s): _____

Other, please specify amount & source: _____

I certify that the above information provided is correct and complete and that I shall notify HUC-JIR of any change in my financial circumstances.

Student's Signature: _____ **Date:** _____

AFFIDAVIT OF SPONSORSHIP

NOTE: This form will be considered incomplete and an I-20 will not be issued any of the following is missing:

- relevant information below;
- the seal/stamp of the appropriate official; or
- required official documents.

This form is valid for only 6 months from the date of signature below for the purpose of issuing an I-20.

I hereby attest that I am willing and able to provide no less than US \$ _____ in cash to the student named below for each year of study at HUC-JIR. I am attaching documents that prove the support is available/attainable; including bank statements, employment/salary letters, investments, tax returns, and other assets. (The amount indicated should agree with the amount on front of this form from the sponsor(s) line).

Name of student (from passport): _____

My relationship to the student is: _____

My full physical (not PO) address is:

Street Address: _____

City: _____ US State/Province: _____

Country: _____ ZIP/Postal Code: _____

The following are all of the persons who are dependent upon me for their housing, food, or financial support. DO NOT INCLUDE PERSONS WHO SUPPORT THEMSELVES. DO NOT INCLUDE THE STUDENT NAMED ABOVE.

NAME	RELATIONSHIP TO ME	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

AFFIRMATION OR OATH OF SPONSOR

Do not sign this until you are in front of the notary or designated official.

I hereby affirm or swear that the contents of the above statements are true and correct.

Name of sponsor, printed: _____

Signature of sponsor: _____

NOTARIZATION (seal/stamp) of Designated Official

SWORN AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20 _____.

Signature of Notary _____ (Seal) My Commission Expires _____

A Stamp or Seal must be placed here for this form to be valid.

Students should keep the original documentation for their visa interview.