



International Statement of Financial Support

Please read carefully and answer all questions regarding citizenship and the source(s) of your financial support while attending Trinity. Mail the completed form by the appropriate deadline date with the Common Application to the **Office of Admissions, Trinity University, One Trinity Place, San Antonio, TX 78212-7200, U.S.A.** This form may also be faxed to (210) 999-8164.

PLEASE PRINT OR TYPE

Student's Name (*as stated on passport*): _____
Last First Middle

Permanent Address: _____

Citizenship Status: I am not a U.S. citizen. I am a U.S. citizen. I am a U.S. Permanent Resident.

If not a U.S. citizen, indicate country of citizenship: _____

If U.S./ Dual Citizenship, indicate country other than the U.S.: _____

If Permanent Resident, please indicate country of citizenship: _____

Permanent Resident Number: _____ Year Permanent Resident status acquired: _____

If you are neither a US Citizen, nor a Permanent Resident and you are currently in the U.S., indicate status:

Student (F-1) Immigration number: _____

Other Visa Type: _____ Number: _____

Native language: _____

Number of years attending schools in which English was the only or principal language of instruction: _____

Please include copies of documentation of your citizenship and visa status for our records. Contact the Director of International Admissions with any questions at (210) 999-7207 or admissions@trinity.edu.

Completion of the following sections is required for all applicants who do not hold U.S. citizenship, Permanent Resident status, or a non-immigrant visa type approved for full-time study in the U.S. Please fill out all appropriate areas and provide verifying documentation. The form must be accompanied by a bank letter, statement copy, or other document. For 2008-09, demonstrated funding should equal at least \$39,000.

When reviewing international applications, Trinity takes into account whether an applicant has requested financial assistance. It is in the best interest of the student to be accurate about their family's ability to pay college expenses, including the exact amount the family is able to contribute to a Trinity education. Failure to do so may jeopardize a student's chance of admission.

Personal or Family Savings

Name on Account: _____

Relationship to Student: _____

Bank: _____

Address: _____

Please attach a recent letter, in English and in US dollars, signed by a bank official.

Guaranteed Support

Please list amount of financial support available for each year.

First year: \$ _____ USD

Estimated Future Support

Second year: \$ _____ USD

Third year: \$ _____ USD

Fourth year: \$ _____ USD

Family Funds (for sources other than savings)

Name: _____

Address: _____

Signature (required): _____

Guaranteed Support

Please list amount of financial support available for each year.

First year: \$ _____ USD

Estimated Future Support

Second year: \$ _____ USD

Third year: \$ _____ USD

Fourth year: \$ _____ USD

Government Support

Name of agency: _____

Address: _____

Contact Person: _____

Title: _____

Please provide an official copy of your award letter.

Guaranteed Support

Please list amount of financial support available for each year.

First year: \$ _____ USD

Estimated Future Support

Second year: \$ _____ USD

Third year: \$ _____ USD

Fourth year: \$ _____ USD

Sponsor or Other Source (specify)

Name of grantor: _____

Address: _____

Enclose a signed affidavit and bank letter (if appropriate) from an authorized person who will guarantee financial support.

Guaranteed Support

Please list amount of financial support available for each year.

First year: \$ _____ USD

Estimated Future Support

Second year: \$ _____ USD

Third year: \$ _____ USD

Fourth year: \$ _____ USD

This information will be used in issuance of an I-20 form if a student is admitted to Trinity University and verifies enrollment by paying an enrollment deposit. The I-20 form will be reviewed at a U.S. consulate or embassy in your home country for approval of F-1 visa status.

Annual totals from all sources of funding:

***First Year (must total \$39,000):** \$ _____ USD

Second Year: \$ _____ USD

Third Year: \$ _____ USD

Fourth Year: \$ _____ USD

I certify that the information included in this document is true, correct and complete to the best of my knowledge, and I understand that deliberately providing false information is grounds for denial or for withdrawal of an admission offer. Furthermore, I shall promptly inform Trinity University if there is any change in any of the information indicated.

Student Signature: _____ Date: _____