

CERTIFICATE OF FINANCES (COF) 2019 - 2020

For Graduate International Applicants Page 1 of 3

All Applicants must complete all pages.

This document is required for all international students who request an I-20 (F-1) or DS-2019 (J-1). Suffolk University must verify that all F-1 or J-1 students have financial support for the first academic year or following a leave of absence.



SUFFOLK
UNIVERSITY
BOSTON

STUDENT ID

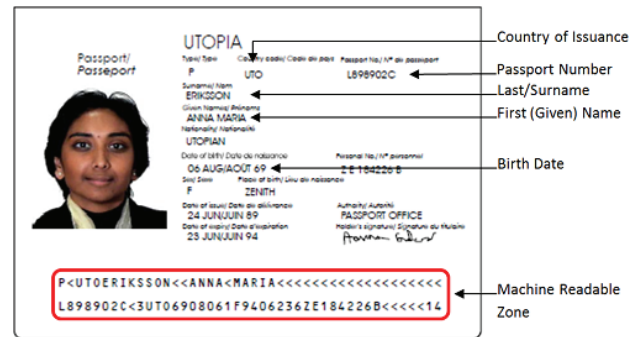
LAST NAME(FAMILY)

FIRST NAME

Please print your name exactly as it is printed in the machine readable zone of your passport. Please reference the **red highlighted** area in the included example:

Document Requested:

- I-20 Document - (F-1) DS-2019 - (J-1)



Address where the I-20/DS-2019 should be sent: - Suffolk University will mail documents via express mail if outside of the US. * If you are a returning student, you will need to request the documents through our website www.suffolk.edu/isso

STREET CITY STATE POSTAL CODE COUNTRY

PHONE FAX EMAIL

PARENT / SPONSOR'S EMAIL

Date of Birth _____
MONTH / DAY / YEAR

Are you requesting a document for a dependent?

- YES NO

Country of Birth _____

A dependent is your spouse or unmarried children under the age of 21.

Country of Citizenship _____

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FIRST NAME

Are you currently in the U.S.? _____ If yes, will you travel outside of the U.S. before attending Suffolk University? _____

If F1 or J-1, will you transfer your SEVIS record from another US Institution?

- NO
- YES / Institution Name: _____

Estimated expenses: 2019 - 2020

PROGRAM	TUITION	LIVING EXPENSES	OTHER EXPENSES (Books & Medical Insurance)	TOTAL FUNDING REQUIRED	DEPENDENTS - If Applicable (Add \$10,000 for Spouse, \$5,000 for each child)	MERIT (Please deduct from Tuition)	TOTAL (Please Complete)
MBA - Business Administration, MSA - Accounting, MSF - Finance, MSFSB - Financial Services & Banking, MST - Taxation, MSBA - Business Analytics, MSMS - Management Studies MSM - Marketing, SBS DUAL DEGREES	\$45,570	\$18,662	\$3,900	\$68,132			
MHA - Healthcare Administration, MPA - Public Administration	\$35,130	\$18,662	\$3,900	\$57,692			
MED - Admin. Higher Education, MAC - Communication, MSCJS - Crime and Justice Studies, MSEPP - Ethics and Public Policy, MSPS - Political Science, MSMD - Medical Dosimetry	\$30,576	\$18,662	\$3,900	\$53,138			
MAGD - Graphic Design MAIA - Interior Architecture	\$30,576	\$18,662	\$3,900	\$53,138			
MHC - Mental Health Counseling	\$32,910	\$18,662	\$3,900	\$55,472			
PHD in Clinical Psychology, PHD in Applied Developmental Psychology	\$36,936	\$18,662	\$3,900	\$59,498			

The I-20 or DS-2019 will be created after being admitted and upon receiving the following documents:

- Certificate of Finances Copy of Passport Deposit

If you are transferring from a US institution we will also need:

- Copy of Current Visa Copy of Current I-20 Transfer Release Form.

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SPONSOR'S STATEMENT OF FINANCIAL SUPPORT (required if funding is provided by anyone other than student, including government sponsorship)

I, _____ (print name of sponsor), guarantee that the sum amount of \$ _____ USD will be available to the above named student for the academic year at Suffolk University. A comparable amount of money will be available for the duration of the student's educational program.

Parent/Sponsor's Signature: _____ Date: _____

Relationship of Sponsor to Applicant: _____

Sponsor's Address: _____

BANK'S OFFICIAL CERTIFICATION OF FUNDS - Please also send along an official bank letter.

This is to certify that I have reviewed the financial information given by the applicant on this form, that it is accurate and that the funds are available.

Bank Official's Signature : _____

Bank Seal/Stamp (REQUIRED)

Bank Official's Name and Title (PRINT): _____

Name and Address of Bank: _____

Date: _____

STUDENT'S CERTIFICATION

I have read the information on this form and it is a true and accurate statement that the funds are available and will be provided.

If any of the information changes at any given time, I will immediately notify the CENTER FOR INTERNATIONAL PROGRAMS AND SERVICES OFFICE (CIPS). I understand that making false or fraudulent statements within this Certificate of Finances may result in disciplinary action.

Applicant's Name (PRINT): _____

Applicant's Signature: _____

Date: _____