Yale SCHOOL OF NURSING Office of Financial Aid

Financial Certification

You must show that you have the minimum sum of \$143,510 available to you for the entire length of your two-year program at Yale University. If you bring a dependent (or dependents), this number increases accordingly (the updated budget for dependents can be found in the Financial Certification Form for International Students). Please identify the sources and amounts of financial support and submit corresponding documentation.

**Please use the following codes:

- P Personal Savings
- **F** Family Contribution
- **S** Scholarship (specify)
- L Loans (specify lender)
- **O** Other (specify)

*This figure includes tuition and fees, Yale Health insurance, and living expenses estimated for your three years of study.

You may include the following Yale School of Nursing sources:

S	Nursing School Scholarship	\$20,000 per year for a total of \$40,000
L	Nursing Student Loan	\$60,000 for your first year \$30,000 in year 2 for a total of \$90,000

If you are in the U.S. in F-1 status and will be transferring your SEVIS record to Yale, Yale cannot transfer your F-1 SEVIS record until you have provided evidence of funding as stated above.

The following forms of financial certification are acceptable. Attach all that apply.

- An original bank statement (or certified copy) in English on bank stationery in your or your family's name. The statement must be issued within the last three (3) months and include your current balance. Scanned copies of original documents are fine to submit for this purpose; however, you will need to take the original financial documents to your visa interview.
- Note: If you submit financial certifications for accounts in a name other than your own (i.e. a family member, friend, etc.), you must also include a letter from that person stating his or her intention to support you financially during your studies at Yale until you graduate. The letter must include your name, the account holder's name, your relationship, and the statement of intention. Please use the attached letter template.
- If receiving a scholarship, a copy of a scholarship letter in your name for study at Yale University. The letter should indicate the amount and period of the scholarship award.
- If receiving a loan, a copy of an approved loan agreement or promissory note.
- If a U.S. citizen or U.S. permanent resident will be supporting you, your sponsor must complete a U.S. Affidavit of Support Form (Form I-134) and provide original financial documentation as required on the Affidavit; both the Affidavit and documentation of resources must be submitted with this declaration form.

Note: Per U.S. immigration regulations, individuals on a student visa have strict limitations for work in the United States. For F-1 student visa holders, students may work no more than 20 hours per week when school is session and full time during the official break periods. However, securing an on-campus job position is not guaranteed and it cannot be your main financial source to support your study at Yale.

400 West Campus Drive Orange, CT 06477 PO Box 27399 West Haven, CT 06516-9072

T 203-737-1790 T 203-737-3868 F 203-436-9761 nursing.yale.edu ysnfinancialaid@yale.edu

Yale school of nursing Office of Financial Aid

Student Sponsorship Affidavit Academic Year 2021-2022

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Directions: Sponsor must attach bank statements or financial documents in their name to demonstrate that funds are available.

Form must be completed in black or blue ink to be processed. Completed applications may be emailed to <u>YSNfinancialaid@yale.edu</u>, faxed to 203-436-9761 or mailed to Office of Student Affairs, Yale School of Nursing, P.O. Box 27399, West Haven, CT 06516-9072

Section 1: Student Information				
First Name:	Middle Initial:	Last Name:		
Section 2: Sponsor Information				
First Name:	Last Name:		Phone Number:	
Relationship to Student:				
Section 3: Financial Information				
I confirm that I will be sponsoring the abov	e-named student during	their entire	e period of study at Yale. I will	
	C			
be providing \$ over th	e course of 2 years to h	elp cover t	heir tuition and living expenses	
with the student I-20/DS-2019 request.				
Please see the enclosed bank statements/fin	ancial documents under	my name	that demonstrate I have the funds	
state above.				
Section 5: Certification				
Signature of Sponsor Da				
Signature of Student		Date		
I hereby certify that the information given is true and complete. I agree to notify the Financial Aid Office immediately of any changes and understand that my aid my change as a result.				
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Yale school of nursing Office of Financial Aid

FINANCIAL CERTIFICATION FORM FOR INTERNATIONAL STUDENTS ADMITTED FOR FALL 2021

Last	t/Family Name:	First Name:	Date of Birth:	City of Birth:	
			(mm/dd	/yyyy)	
Fina	ncial Certification				
•	In order to receive your I-20 for Yale Scho academic program at Yale University (e.	0. 1			tire
•	Fully complete the section below "Source year of your academic program.	s and Amount of Financial Support for Di	uration of Academic Program" to dem	onstrate your funding source(s) for ea	ch

- If you plan to bring dependents with you to the U.S. you must submit proof of an additional funding. See the table below "Estimated Expenses for the Academic Year 2021-2022" (Remember dependents in F-2 status cannot work in the U.S.)
- In order to assure that you will have sufficient time to receive your I-20 and apply for your visa, please submit your financial documents by no later than <u>March</u> <u>15,2021</u>.

Acceptable Forms of Financial Certification

The following forms of financial certification are acceptable:

- 1. A bank statement you or your sponsor's name (sponsor may be family member or friend). The statement must be issued within the last three (3) months and include the current balance which shows more than the required amount.
- 2. If the bank statement has any name other than yours (the student), the sponsor must provide a letter of support.
- 3. A photocopy of a scholarship letter in your name for study at Yale University.

ESTIMATED EXPENSES FOR THE ACADEMIC YEAR 2021-2022

Estimated Expenses	Single Student	Student w/Spouse	Each Child
Tuition & Fees	\$51,105	\$51,105	
Living Expenses	\$18,000	\$35,000	\$500(Per Child/Month)
Required Health Insurance	\$2,650	\$9,542*	*\$15,902(family)
TOTAL	\$71,775	\$95,647	

SOURCES AND AMOUNTS OF FINANCIAL SUPPORT FOR DURATION OF ACADEMIC PROGRAM SEE CHART ABOVE FOR TOTAL OF FUNDS REQUIRED

If your program length is for multiple years, you must indicate the anticipated source of funding for each year.

Sources of Funding	Year #1 Amount	Year #2 Amount	Year #3 Amount	Year #4 Amount
1.				
2.				
3.				
4.				
TOTAL (equal to estimated expense total above)				

Immigration Document Mailing Address

Please provide the best mailing address for your immigration document.

Address Line 1:		
Address Line 2:		
City:	Zip Code:	Country:
certify that I have truthfully stated the	financial arrangements to support my studies at Yale University	у.
Signature:		Date:

RETURN WITH THE REQUIRED FINANCIAL DOCUMENTATION BY EMAIL TO: ysnfinancialaid@yale.edu