

# INTERNATIONAL UNDERGRADUATE STUDENT FINANCIAL CERTIFICATE

Montana State University (MSU) – Bozeman, MT 59717-2580

All undergraduate international applicants requesting admission to MSU must provide verification of financial support in the amount of \$32,090 (thirty-two thousand and ninety U.S. dollars). This amount is estimated to cover tuition, fees, and living expenses for each academic year (9 months). An estimated budget that includes additional expenses can be found on the second page.

### Student Data

*(Please provide copies of passports)*

This form must be filled out completely, regardless of any scholarships that may be awarded by the university.  
Any application accompanied by an incomplete financial certificate will not be processed.

	Family (Last) Name	First (Given) Name	Middle Name
Student			
Spouse			
Child 1			
Child 2			
Child 3			

*A student accompanied by dependent (s) must be able to provide additional minimum funds of \$8,000/year to support a spouse and \$5,000 to support each child (does not include health insurance or day care)*

### Annual Support

*(Check all applicable)*

Please fill out the following:

#### ***I am sponsored:***

My sponsor/Third Party is providing full support for me (sponsorship letter attached)

My sponsor/Third Party is providing partial support of \$ \_\_\_\_\_ (sponsorship letter + bank statement for balance attached)

#### ***I am NOT sponsored:***

My family and/or I am able to provide my own funds in the amount of \$32,090 (bank statement attached)

**SEMESTER TO ENROLL AT MSU** *(check one):*

Fall Semester 20

Spring Semester 20

Summer Semester 20

### **COMPLETE LEGAL NAME**

\_\_\_\_\_  
FAMILY (LAST) NAME

\_\_\_\_\_  
GIVEN (FIRST) NAME

\_\_\_\_\_  
MIDDLE / MAIDEN NAME

### **PERMANENT ADDRESS**

\_\_\_\_\_  
STREET AND NUMBER

\_\_\_\_\_  
CITY OR TOWN / POSTAL CODE

\_\_\_\_\_  
COUNTRY

### **Estimated Basic Undergraduate Budget: 9 months**

The expenses shown below reflect estimated costs for a student carrying a full-time load (12 or more credits) for fall and spring semesters, 2016/2017. Actual fees may vary based on specific program fees or the number of credits carried each semester. These figures are estimates only and subject to change upon approval by the Montana Board of Regents.

	<i>Per Semester</i>	<i>Per Year</i>
Tuition and Fees	\$11,595	\$23,190
Room/Board	\$4,450	\$8,900
Books/Supplies*	\$650	\$1,300
Health Insurance**	\$1,683	\$3,366

TOTAL: \$36,756

*\*Costs for books and supplies vary depending on number of credits carried per semester and courses taken.*

*\*\*Medical care can be very expensive in the U.S.. Students are required to have health insurance for themselves and their family. MSU offers student health insurance at a rate of \$1,683 per semester, per student. You can opt out of MSU health insurance if proof of other health insurance is provided.*

**Both statements below must be completed. In addition, a bank statement or other form of documentation of financial support must be provided to assure that funds are available for the first year of study. Fees are determined by the Montana Board of Regents annually and are subject to change. Keep a copy of these documents for your records. It may be necessary to show verification of financial status at the U.S. Port of Entry.**

### **SPONSOR'S STATEMENT**

I, \_\_\_\_\_ do hereby guarantee that \_\_\_\_\_  
NAME OF SPONSOR, THIRD PARTY, OR FAMILY MEMBER NAME OF STUDENT

*will have a minimum of \$32,090 (thirty-two thousand and ninety U.S. dollars) for each academic year that this person is a student at Montana State University.*

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Signed \_\_\_\_\_  
MONTH DAY YEAR SPONSOR, THIRD PARTY, OR FAMILY MEMBER RELATIONSHIP TO STUDENT APPLICANT

### **APPLICANT'S STATEMENT**

*I certify that all statements on this form are true and accurate, and that funds will be provided as specified above. I will notify Montana State University of any changes in my financial circumstances or that of my sponsor. I understand that, should I be admitted and register, failure on my part or that of my sponsor to provide the needed funds will result in cancellation of my registration and termination from the undergraduate program at Montana State University. I authorize MSU to send bills to and communicate with my sponsor as necessary to assure payment of outstanding charges to Montana State University.*

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Applicant's signature \_\_\_\_\_  
MONTH DAY YEAR SIGN COMPLETE LEGAL NAME