



### Application for DS-2019 / Certificate of Eligibility (I-20)

**\*\*PLEASE COMPLETE THIS FORM AND MAIL BACK AS SOON AS POSSIBLE. FAILURE TO DO SO WILL DELAY PROCESSING OF YOUR STUDENT VISA\*\***

Family Name: (Last) \_\_\_\_\_ Given (First) \_\_\_\_\_ MI (optional) \_\_\_\_\_

Gender:  Male  Female

Date of Birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Telephone (with area code): (\_\_\_\_) \_\_\_\_\_ Visa status you are applying for:  F1  J1

Email Address: \_\_\_\_\_

STREET: \_\_\_\_\_ VILLAGE (OPTIONAL): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_

POSTAL CODE/ZIPCODE: \_\_\_\_\_ HOME COUNTRY: \_\_\_\_\_

Intended Degree at Medaille College (check one):

**\*\*For F1 Visa\*\***

**\*\*For J1 Visa\*\***

Associate  Bachelor's

Exchange Student

Intended Major: \_\_\_\_\_  Bachelor's (2+2)  Bachelor's (3+1)

If you are currently in the U.S., please indicate the type of visa you hold: \_\_\_\_\_

If you currently have an F-1 visa status, please list the name of the university, college, or institute that issued your I-20:

\_\_\_\_\_  
(Please list the name and phone number of your current DSO and address of the institution)

Address where your completed I-20/DS-2019 should be mailed:

NAME: \_\_\_\_\_ STREET: \_\_\_\_\_

VILLAGE (OPTIONAL): \_\_\_\_\_ CITY: \_\_\_\_\_

STATE/PROVINCE \_\_\_\_\_ POSTAL CODE/ZIPCODE: \_\_\_\_\_

HOME COUNTRY: \_\_\_\_\_

### TUITION/FEES & ROOM/BOARD CHARGES for 2022/2023:

Costs:	FALL '22	SPRING '23	YEAR TOTAL
Tuition/Fees (books not included):	\$17,000	\$17,000	\$34,000
Room/Board (w/ 19 meals per week meal plan):	\$7,000	\$7,000	\$14,000
<b>Total:</b>	<b>\$24,000</b>	<b>\$24,000</b>	<b>\$48,000</b>


**FINANCIAL SUPPORT DECLARATION:**

Students must provide financial documentation that supports ONE YEAR of tuition/fees and room/board; EXCHANGE STUDENTS need to show documentation for room and board for each semester of attendance.

SOURCE	Amount Secured	Required Document(s)
Student's Personal Funds:	US \$ _____	Student's original bank statement.
Family Support:	US \$ _____	**Letter/statement of support from family member(s) providing support (please state relationship to student). **Original bank statement(s) from family member(s). <b>*BANK STATEMENTS AND/OR BANK LETTERS WILL NOT BE VALID UNLESS ACCOMPANIED WITH A LETTER OF SUPPORT*</b>
Other Support:	US \$ _____	**Letter/statement of support from sponsor providing support (please state relationship to student). **Original bank statement(s) from sponsor. <b>*BANK STATEMENTS AND/OR BANK LETTERS WILL NOT BE VALID UNLESS ACCOMPANIED WITH A LETTER OF SUPPORT*</b>
Government/Agency Support:	US \$ _____	**Letter/statement of support from agency/organization sponsor providing support. <i>Name, address and contact information for the agency/organization must be included in the letter.</i>
Total Support (add all forms of support and enter amount here):	US \$ _____ \$ 0.00 _____	<b>**Please note that this amount does <i>not</i> include any international scholarships or grants from Medaille College**</b>

BY SIGNING THIS DOCUMENT, I CERTIFY THAT I AM EXPECTED TO MAINTAIN FULL-TIME STUDY AT MEDAILLE COLLEGE AS A NON-IMMIGRANT STUDENT. I CERTIFY THAT I HAVE SECURED THE FINANCIAL RESOURCES NECESSARY TO SUPPORT THE DURATION OF MY STUDIES AT MEDAILLE COLLEGE AND THAT ALL INFORMATION SUBMITTED ON THIS DOCUMENT IS ACCURATE AND TRUTHFUL. *FAILURE TO UPHOLD THIS AGREEMENT MAY RESULT IN DENIAL OR TERMINATION OF YOUR I-20 or DS-2019.*

 \_\_\_\_\_  
 Student's Signature

 \_\_\_\_\_  
 Date