

Family Name: _____ First/ Given Name: _____ UIN: _____

E-mail: _____ Date of Birth (mm/dd/yyyy): _____

Phone #: _____ Major(s): _____

Degree Level: Bachelor Master Doctorate Other _____

Why are you submitting this form?

- I am updating the funding on my I-20/ DS-2019.
- I am submitting this form as supporting documentation for another request.

How much funding do I need to show?

Use this to help determine how much proof of funding is required for this request, this section is not required.

Tuition: http://www.ois.uic.edu/students/prospective/estimated_expenses/ _____

Living: \$1702 USD per month (\$15,317 per academic year for undergraduates) _____

Living: \$1889 USD per month (\$17,000 per academic year for graduate/professional) _____

Books: \$156 USD per month (\$1400 per academic year) _____

First Dependent: \$700 USD per month (\$6300 per academic year) _____

Each Additional Dependent: \$500 USD per month (\$4500 per dependent, per year) _____

Total: _____

As the undersigned, I understand the need to maintain my F-1 or J-1 lawful immigration status. I also understand that immigration regulations are subject to change, and ultimately it is my responsibility to be aware of such changes. Further, I hereby authorize the University to disclose copies of documents related to my immigration status to federal agencies if requested to maintain compliance.

Signature of Student: _____

Date: _____

Please complete Funding Section on page 2...

Funding

F-1 or J-1 students must update their I-20/DS-2019 any time their primary source of funding changes. Financial documentation may include one or more of the following:

- **Certificates of Deposit**
- **Checking Accounts**
- **Education Loans:** it must be evident that the person is pre-approved or approved for the loan
- **Fixed Deposits, Fixed Term Certificate of Deposits, Bonds, Time Deposits and Term Deposits:** the maturity date or value date must be clearly listed and be before the first day of the semester.
- **Provident Funds:** the amount available for withdrawal must be stated in the letter
- **Savings Accounts:** all forms of savings accounts will be accepted, including demand deposit, current accounts and money market.
- **Scholarship Award Letters:** must clearly state what the scholarship includes, such as tuition, fees, and books. If the scholarship includes a stipend, it must state the dollar amount per month.

Financial documents cannot be more than **six (6) months old, must be signed and include a stamp from the bank.**

Type of Resource/Funding	Documents Required	Support Amount
Student's Personal Funds	Letter from bank on official bank letterhead indicating account type & available funds OR Bank statement indicating account type & available funds	\$ _____
Family Funds/Sponsor Name of Sponsor: _____ Relationship of Sponsor to student: _____ Signature of Sponsor: _____	Letter from bank on official letterhead indicating account type & available funds OR Bank statement indicating account type & available funds	\$ _____
Funds from another source (i.e. Home Government)	Attach copy of your letter, on official letterhead, confirming the amount and type of financial aid.	\$ _____
Fellowship	Letter on department letterhead stating amount of funding and duration of time funding is provided	\$ _____
Tuition Waiver only/No assistantship	Letter on department letterhead stating amount of funding and duration of time funding is provided	\$ _____
<p>Teaching/Research/Graduate Assistantship</p> <p>Appointment: _____ % Department: _____</p> <p>Valid : ____/____/____ until ____/____/____</p> <p>Salary: \$ _____ per <input type="checkbox"/> Month <input type="checkbox"/> Semester <input type="checkbox"/> Academic year Renewable? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is this funding directly from any government agency and/or designated for international exchange? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, name agency _____</p> <p>I certify that the above information is true and correct, and that funds are available from this department to remunerate the named student as indicated above.</p> <p>_____</p> <p>Print Name of Department Head Phone #: Department Head Title</p> <p>_____</p> <p>Print Name of Department Contact Phone #: Department Head Signature</p>		