

## Application for I-20/DS-2019 Form and Affidavit of Support

### PERSONAL INFORMATION

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Name (as displayed on passport): \_\_\_\_\_  
*Last Name*
*First Name*
*Middle Name*

Gender:  Male  Female Country of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_  
*(MM/DD/YYYY)*

Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

### DEPENDENT INFORMATION

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**Complete this section only if your spouse or children will be traveling with you.**

Last Name	First Name	Date of Birth <i>(MM/DD/YYYY)</i>	Country of Birth and Citizenship	Relationship to Student

\*Please note that \$5,000 in financial support is required for a spouse and \$3,750 for each additional dependent.

### MAILING ADDRESS

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**Address to which you would like the I-20 or DS-2019 form sent.**

Number and Street Address:

\_\_\_\_\_

City and State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

### VISA INFORMATION

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What type of Visa will you be applying for?  F-1  J-1

Are you currently in the United States?  Yes  No If yes, list your current visa type: \_\_\_\_\_

Are you changing your current immigration status?  Yes  No

If yes, current \_\_\_\_\_ To: \_\_\_\_\_

If yes, how? \_\_\_\_\_

If you are currently studying in the United States with an F-1 or J-1 visa, please provide:

Visa expiration date *(MM/DD/YYYY)*: \_\_\_\_\_ SEVIS number: \_\_\_\_\_

Name of institution on your I-20 or DS-2019 form:

\_\_\_\_\_

**FINANCIAL INFORMATION**

**Please read before you submit this form.**

- 1) Financial certification is required for issuance of the I-20 or DS-2019 form.
- 2) Evidence of financial capability should be official and in English, showing sufficient funds to cover the educational and living expenses for the duration of study. Costs include, but are not limited to, tuition and fees, room and board, health insurance, books and personal expenses.
- 3) Acceptable forms of evidence are: official bank statement, letter from a bank or letter of scholarship. Documents cannot be more than 6 months old and must be in English.
- 4) The financial sponsor must complete and sign the bottom portion of this form. If more than one sponsor is needed, each sponsor must complete a separate form.

2018-2019 ESTIMATED ANNUAL COST OF ATTENDANCE FOR INTERNATIONAL STUDENTS		
	GRADUATE	UNDERGRADUATE
Tuition and Fees*	\$31,824	\$32,750
Living Expenses*	\$19,100	\$19,100
Health Insurance*	\$ 1,806	\$ 1,806
<b>Total (per year of study) *</b>	<b>\$52,730</b>	<b>\$53656</b>

\*Figures are subject to change without notice.

\* A detailed breakdown of costs can be found at: [njit.edu/bursar/tuition](http://njit.edu/bursar/tuition)

**AFFIDAVIT OF SUPPORT FROM PERSONAL SPONSOR**

This is to certify that I, \_\_\_\_\_, have agreed to provide US\$ \_\_\_\_\_ to  
*Sponsor's Name*  
 \_\_\_\_\_ for the purpose of full-time study at New Jersey Institute of Technology.  
*Student's Name*

I am submitting financial certification indicating the availability of these funds. I further understand that NJIT will not provide need-based assistance to the applicant, and that I must provide evidence of these funds for one year of the applicant's course of study. My relationship to the student is \_\_\_\_\_

Sponsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (MM/DD/YYYY)

**All financial support documents must be official.**

**ACKNOWLEDGEMENT**

With the admittance of this form, I acknowledge that NJIT has the right to deny any financial document deemed unacceptable and can request additional information at any time. Furthermore, I certify that the information given by me on this form is complete and accurate and I understand that misrepresentation on this form may be cause for rescinding admission.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (MM/DD/YYYY)