

GRADUATE FINANCIAL AFFIDAVIT

Financial proof must be provided to comply with U.S. government regulations. Your Financial Affidavit must originate from your source of support. Submit this document and supporting financial proof with your application and other admissions documents. Final admission is not granted until University Admissions is satisfied that all documents are complete and correct. The amounts listed are for the 2019-2020 academic year.

Applicant's Name:

(As it appears on Passport) Last/Family Name First/Given Name Middle Name

Tech ID Date of Birth (MM/DD/YYYY) Country of birth Country of Citizenship

I certify with my signature that the total amount of money that I have for my first year of study at Minnesota State Mankato meets the minimum required for my program (including funds for spouse and children, when applicable) and I can cover the expenses of my entire program. I certify the information provided is correct and complete and that I shall notify Minnesota State Mankato of any change in my financial circumstances. I understand that inaccurate information can be cause for terminating enrollment at Minnesota State Mankato.

Student signature _____ Date _____

Part 1

Do you expect to come to the U.S.: ☐ Alone ☐ With Spouse ☐ With Children

Dependents (if applicable):

Family (Last) Name	Given (First) Name	Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship

Family (Last) Name	Given (First) Name	Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship

Family (Last) Name	Given (First) Name	Date of Birth (mm/dd/yyyy)	Country of Birth	Relationship

If you are currently outside the U.S., what type of visa do you wish to receive? ☐ F-1 ☐ J-1

If you are currently in the U.S., what type of visa do you hold? _____

If you are currently in the U.S. on an F-1 or J-1 visa, which school, college, university or institute issued your I-20 or DS-2019?

Name and address of institution

TUITION AND ESTIMATED LIVING EXPENSES FOR 9 MONTHS

GRADUATE PROGRAMS - EDINA CAMPUS		TUITION ESTIMATED	GRADUATE PROGRAMS - MANKATO CAMPUS		TUITION ESTIMATED
MBA/MACC		\$29,575	MBA/MACC		\$27,041
PSM-GIS		\$28,001	PSM-GIS/PSM-ENG-MGMT		\$27,041
PSM-ENG-MGMT		\$28,001	PSM-INFO-SECURITY		\$27,694
PSM-INFO-SECURITY		\$28,001	OTHER GRADUATE PROGRAMS		\$22,995
MPA		\$24,139	MSW		\$24,006
OTHER GRADUATE PROGRAMS		\$23,956	GRADUATE TEACHER LICENSURE PROGRAMS		\$24,006
Ed.D./Psy.D.		\$27,431	Ed.D./Psy.D.		\$26,471
DNP		\$34,333	DNP		\$33,372

(Based upon full-time status = enrolled in 12 credits per semester.)

Dependent expenses:

\$6,500 for the first dependent

\$4,000 for each additional dependent

Part 2

DECLARATION OF FINANCIAL SUPPORT

SOURCE OF FUNDS	AMOUNT ASSURED 1ST YEAR	REQUIRED DOCUMENTATION
Student's personal funds:	U.S. \$ _____	<input type="checkbox"/> Copy of bank statement
Family support:	U.S. \$ _____	<input type="checkbox"/> Sponsor's certification and copy of bank statement Name and relationship of family member(s): _____ _____
Other support:	U.S. \$ _____	<input type="checkbox"/> Sponsor's certification and copy of bank statement Name and relationship of sponsor(s): _____ _____
University support:	U.S. \$ _____	<input type="checkbox"/> Copy of award letter Type of award: _____
Government/agency support:	U.S. \$ _____	<input type="checkbox"/> Copy of letter or document from government/agency Name of organization: _____
TOTAL SUPPORT	U.S. \$ _____	This amount should add up to the tuition and estimated living expenses on page 1 of the Affidavit.

CERTIFICATION OF AGREEMENT BY STUDENT

APPLICANT: Please provide the REQUIRED signature and date below. By signing here, you are agreeing to the following statement.

I certify that the information provided is correct and complete and that I shall notify Minnesota State University, Mankato of any changes in my financial circumstances. I understand that inaccurate information can be cause for terminating enrollment at Minnesota State University, Mankato.

Student signature _____ Date _____

CERTIFICATION OF AGREEMENT BY SPONSOR

I certify that I, _____, am able and willing to provide financial support to _____
Name of student
for the total amount of U.S. \$ _____ per year while she/he studies at Minnesota State University, Mankato.

Sponsor's signature _____ Date _____

Sponsor's address _____ Tel _____

_____ Fax _____