We welcome your application for admission to our university. The University of North Carolina at Pembroke is a state-supported university and the majority of our financial aid is based on need and is provided by either the state or federal government. Government policies prohibit awarding government funds to foreign students.

The issuance of Form I-20 or DS-2019 to international applicants is dependent upon:

1. Your academic readiness and acceptance to UNCP.
2. Your ability to afford the costs associated with attending UNCP.

You must satisfy both of these requirements prior to acceptance to the university and issuance of Form I-20 or DS-2019.

**Estimated Annual Costs in U.S. Dollars as of January 2015. Subject to change.**

<table>
<thead>
<tr>
<th>Semester</th>
<th>Year*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and Fees</td>
<td>$7,619.00</td>
</tr>
<tr>
<td>Books and Health Insurance</td>
<td>$1,302.00</td>
</tr>
<tr>
<td>Living Expenses</td>
<td>$4,051.00</td>
</tr>
<tr>
<td>Totals</td>
<td>$12,972.00</td>
</tr>
</tbody>
</table>

*Year includes two semesters of tuition, fees, books and health insurance. This figure also includes living expenses for an entire year. Living expenses do not include the costs associated with dependents or family members. While students may choose to estimate their expenses based solely upon attending fall and spring semesters ($27,943), UNCP encourages students to make estimates based on year-round attendance ($31,011). Whether attendance is planned for 9 or 12 months, additional expenses beyond the cost of attendance should be anticipated and are solely the responsibility of the student.

**Financial Certification**

You must complete this form and submit supporting documents to UNCP prior to the issuance of your I-20 or DS 2019. Failure to provide official bank statements and other supporting documents can result in the delay or rejection of your visa application. By law, international student must attend the university full-time and are not permitted to work off-campus. Do NOT include or anticipate any income from U.S. employment as a part of your financial plan.

**Personal/Family Savings:**

Name
Last (Family) name
First name (Surname)
Middle name
Preferred name

**Family/Sponsor Support**

Name of sponsor
City, Country
Relation to student
US $

**Scholarship/Financial Aid**

Name of agency
City, Country
Type of aid (e.g. scholarship, grant)
US $

**Other source of funding**

Please explain and attach documentation of support
US $

**Total Financial Support** - Must be greater than or equal to US $27,943 for 9 months OR US $31,011 for 12 months = US $

1-01-15 updated
This form may be given to a bank official to complete and sign verifying the actual amount of money that will be available for the student’s educational expenses. This form should be submitted to the bank by the person who will be providing the money.

We recommend that you prepare **two originals** since one will be needed by the university and one by the student when applying for a visa.

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>Last (Family) name</th>
<th>First name (Given)</th>
<th>Middle name</th>
<th>Preferred name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Depositor</th>
<th>Last (Family) name</th>
<th>First name (Given)</th>
<th>Middle name</th>
<th>Relation to applicant</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of bank</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address of bank</th>
<th></th>
</tr>
</thead>
</table>

In compliance with the request of our depositor, we affirm that on the close of business on ____________________________ Month Day Year the deposit balance to the credit of ___________________________________________________________ Last (Family) name First name (Given) Middle name is currently equal to the following amount of US Dollars: US $ ____________________________

This account was opened on ____________________________________________________________ Month Day Year

To the best of our knowledge of the banking and exchange laws of this country, these funds may be sent out of our country to support education studies in the United States.

<table>
<thead>
<tr>
<th>Name of bank official (Please print.)</th>
<th>Position with bank</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Signature of bank official</th>
<th>Date</th>
</tr>
</thead>
</table>

Official stamp or seal of bank
Affidavit of Support

Please use this form if a sponsor or someone other than the applicant or parent(s) will provide financial support while pursuing studies at The University of North Carolina at Pembroke. Complete and return with all other application materials.

It is required that sponsors attach bank statements, pay stubs, etc. demonstrating their ability to support the student.

Only one benefactor per form. Please make copies as needed.

Name of Applicant/Student

<table>
<thead>
<tr>
<th>Last (Family) name</th>
<th>First name (Given)</th>
<th>Middle name</th>
<th>Preferred name</th>
</tr>
</thead>
</table>

Name of Benefactor

<table>
<thead>
<tr>
<th>Last (Family) name</th>
<th>First name (Given)</th>
<th>Middle name</th>
<th>Relation to applicant</th>
</tr>
</thead>
</table>

Address of Benefactor

______________________________

I hereby state in the presence of the official listed below that I am able and willing to provide the necessary fund for the support of

(____ Student)______________________

<table>
<thead>
<tr>
<th>Last (Family) name</th>
<th>First name (Given)</th>
<th>Middle name</th>
</tr>
</thead>
</table>

Furthermore, I understand the full costs associated with study at The University of North Carolina at Pembroke and guarantee to provide whatever funds are needed for fees, travel, insurance, medical emergencies, and living expenses up to the amount of

US $ ___________________________

U.S. Dollars

______________________________

Signature of Benefactor

Date

Signed in my presence and/or signature verified in person by the Benefactor named above

______________________________

Signature of Notary/Certifying Official

Date

______________________________

Official stamp or seal of notary/certifying official