

### Office of International Student Services

7502 Fondren Road, Houston, TX 77074 Fax: (281)-3292 Email: goglobal@hc.edu www.hc.edu/international

# 2024-2025 Financial Affidavit International Graduate Students - Master of Arts in Apologetics

Under U.S. law, the University must have evidence of adequate financial resources, before issuing an I-20 form. Complete this form and attach official banking documentation to it. Keep copies of all financial documents submitted, as you will need to present the same information to the U.S. consulate or embassy when obtaining a visa. You may be requested to show it again when you pass through Immigration inspection coming into the U.S.

Estimate of expenses for one academic year\* at Houston Christian University, 2024-2025:

Tuition and Fees: \$12,910.00
Room and Board: \$12,928.00
Books, Insurance, and Supplies: \$1,000.00
Transportation: \$1,900.00
Personal expenses: \$2,802.00
TOTAL: \$31,540.00

\*Amounts listed are a total estimate for the Fall and Spring Semesters. They are subject to change.
THIS IS NOT A PAYMENT TO HOUSTON CHRISTIAN UNIVERSITY and IS ONLY FOR THE PURPOSES OF PROVIDING
REQUIRED DOCUMENTATION FOR THE F1 STUDENT VISA. Any misrepresentation of funds and non-payment of student accounts are grounds for I-20 denial or visa cancellation.

#### Section I – to be completed by applicant:

City

| Name (as written in passport)                                                                                                                                   |                     |                         |             |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------|-------------|--------------------------------|
|                                                                                                                                                                 | Family/Last         | Given/First             |             | <br>Middle                     |
| Date of Birth                                                                                                                                                   | Place of Birth      |                         |             |                                |
| Month/Day/Year                                                                                                                                                  |                     | City                    |             | Country                        |
| Country of Citizenship                                                                                                                                          |                     | Coming to the U.S.:     | Alone       | ☐ With Dependents*             |
| **If you will be accompanied by deper<br>copies of their passports. You must pro<br>to issue the appropriate documents.<br>Permanent International Address: (Th | ovide an additional | \$5,000.00 of financial | support per | dependent. This will allow HCU |
| Street                                                                                                                                                          |                     | ·                       |             |                                |
| City State/                                                                                                                                                     | Providence          | Country                 |             | Postal Code                    |
| Local Address: (inside the United State                                                                                                                         | es) email & phone_  | <del></del>             |             |                                |
| <del></del>                                                                                                                                                     |                     |                         |             |                                |
| Street                                                                                                                                                          |                     |                         |             |                                |

Postal Code

Country

State/Providence



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|                                                                                                                                                                                        | promise to provide financial support for                                                                                                                                                                                                                                                                         |                                                                                                                                     |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--|
| Name of Sponsor (in Print)                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                  | Name of student (in Print)                                                                                                          |  |
| n the amount of \$                                                                                                                                                                     | *** U.S. dollars.                                                                                                                                                                                                                                                                                                |                                                                                                                                     |  |
| personal expenses while he/she is a studer<br>ffidavit, I certify that information is accura<br>bove named student will not become a pu<br>not be held responsible for unforeseen diff | or tuition, fees, room, board, insurance, books, so it in the United States completing his/her degree ate and assure Houston Christian University and ablic charge in the United States. Also, I assure lifeculties that alter my financial situation. Official six months) verifying available sufficient funds | ee. By signing my name to this<br>If the U.S. Government that the<br>Houston Christian University will<br>I documentation such as 3 |  |
| Signature of person providing funds                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                  | <br>Date                                                                                                                            |  |
| Relationship to applicant                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                     |  |
| ***Please note, total funds must                                                                                                                                                       | t be equal to or greater than the total amount li                                                                                                                                                                                                                                                                |                                                                                                                                     |  |
| copy of this page and accompany                                                                                                                                                        | ying bank documents, by another relative or frie                                                                                                                                                                                                                                                                 | end.                                                                                                                                |  |
| copy of this page and accompany  This is not a payment to Houston                                                                                                                      | ·                                                                                                                                                                                                                                                                                                                | end. es of providing required                                                                                                       |  |
| copy of this page and accompany  This is not a payment to Houston documentation for the F1 Studen                                                                                      | ying bank documents, by another relative or frience.  The christian University and is only for the purpose.                                                                                                                                                                                                      | end. es of providing required                                                                                                       |  |
| This is not a payment to Houston documentation for the F1 Studer upon admission.                                                                                                       | ying bank documents, by another relative or frience of the purpose of the purpose of the student will need to create a payment                                                                                                                                                                                   | end.<br>es of providing required<br>ent plan with Financial Aid                                                                     |  |
| This is not a payment to Houston documentation for the F1 Studer upon admission.                                                                                                       | ying bank documents, by another relative or frience.  The christian University and is only for the purpose.                                                                                                                                                                                                      | end.<br>es of providing required<br>ent plan with Financial Aid                                                                     |  |



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## Section III – to be completed only if there are dependents

| <b>Dependents inform</b><br>U.S.) | nation: (please comp | olete the follow | ving for ead | ch of your depe                      | ndents that will be accon | npanying you to t |  |
|-----------------------------------|----------------------|------------------|--------------|--------------------------------------|---------------------------|-------------------|--|
| Dependent #1:                     | Spouse               | Child            | /            | □Male                                | Female                    |                   |  |
| Name ( <b>as written o</b>        | on passport- *attach | сору)            |              |                                      |                           |                   |  |
|                                   |                      |                  | Family       |                                      | First                     | Middle            |  |
| Date of Birth                     |                      |                  | PI           | ace of Birth                         |                           |                   |  |
|                                   | Month/Day/Year       |                  |              |                                      | City, Country             |                   |  |
| Country of citizensh              | nip                  |                  | Cour         | ntry of legal per                    | manent residence          |                   |  |
| Dependent #2:                     | ☐Spouse              | Child            | /            | □Male                                | Female                    |                   |  |
| Name ( <b>as written o</b>        | on passport- *attach | сору)            |              |                                      |                           |                   |  |
|                                   |                      |                  | Family       |                                      | First                     | Middle            |  |
| Date of Birth                     |                      |                  | PI           | ace of Birth                         |                           |                   |  |
|                                   | Month/Day/Year       |                  |              |                                      | City, Country             |                   |  |
| Country of citizensh              | nip                  |                  | Cour         | ntry of legal per                    | manent residence          |                   |  |
| Dependent #3:                     | $\square$ Spouse     | Child            | /            | □Male                                | Female                    |                   |  |
| Name ( <b>as written o</b>        | on passport- *attach | сору)            |              |                                      |                           |                   |  |
|                                   |                      |                  | Family       |                                      | First                     | Middle            |  |
| Date of Birth                     |                      |                  | PI           | ace of Birth                         |                           |                   |  |
|                                   | Month/Day/Year       |                  | _            |                                      | City, Country             |                   |  |
| Country of citizensh              | nip                  |                  | Cour         | ntry of legal per                    | manent residence          |                   |  |
| Dependent #4:                     | Spouse               | Child            | /            | □Male                                | Female                    |                   |  |
| Name ( <b>as written o</b>        | on passport- *attach | сору)            |              |                                      |                           |                   |  |
|                                   |                      |                  | Family       |                                      | First                     | Middle            |  |
| Date of Birth                     |                      |                  | PI           | ace of Birth                         |                           |                   |  |
|                                   | Month/Day/Year       |                  |              |                                      | City, Country             |                   |  |
| Country of citizenship            |                      |                  | Cour         | Country of legal permanent residence |                           |                   |  |