

Office of International Student Services

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

2023-2024 Financial Affidavit International Graduate Students - Master of Fine Arts

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, 2023-2024:

Tuition and Fees: \$21,250.00
Room and Board: \$12,062.00
Books, Insurance, and Supplies: \$1,000.00
Transportation: \$1,900.00
Personal expenses: \$2,802.00
TOTAL: \$39,014.00

*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:

Name (as written in passport)

City

	Family/Last	Given/First		Middle	
Date of Birth	Place of Birth				
Month/L	Day/Year	City		Country	
Country of Citizenship	C	oming to the U.S.:	Alone	☐ With Dependents*	
	ed by dependents, please provide ou must provide an additional \$5 cuments				
to issue the appropriate ac	odinents.				
	address: (This is your physical per	manent address in y	our home cour	utry)	
		manent address in y	our home cour	ntry)	
Permanent International A		manent address in y Country	our home cour	Postal Code	
Permanent International A Street City	ddress: (This is your physical per	Country	our home cour		
Permanent International A Street City	Address: (This is your physical per	Country	our home cour		

Postal Code

Country

State/Providence



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Section II – to be completed by financial sponsor							
, promise to provide financial support for							
I, promise to pi Name of Sponsor (in Print)	Name of student (in Print)						
in the amount of \$	*** U.S. dollars.						
affidavit, I certify that information is accurate and assure Ho above named student will not become a public charge in the	tates completing his/her degree. By signing my name to this buston Christian University and the U.S. Government that the United States. Also, I assure Houston Christian University will my financial situation. Official documentation such as 3 months						
Signature of person providing funds							
Relationship to applicant							
•	reater than the total amount listed on page one of this affidavit. y be asked to provide proof of further support, including another ents, by another relative or friend.						
• •	rsity and is only for the purposes of providing required ent will need to create a payment plan with Financial Aid						
To be signed by a witness:							
I, witnessed the Name of Witness (in Print)	e signing of this document by						
on							
Month/Day/Year							
	Signature of Witness						



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Section III – to be completed only if there are dependents

Dependents inform U.S.)	nation: (please comp	lete the follo	wing for e	each of your depe	endents that will be accor	mpanying you to th	
Dependent #1:	Spouse	Child	/	☐Male	Female		
Name (as written o	n passport- *attach	сору)					
			Family		First	Middle	
Date of Birth				Place of Birth	City, Country		
	Month/Day/Year				City, Country		
Country of citizensh	nip		Co	untry of legal per	manent residence		
Dependent #2:	Spouse	Child	/	☐Male	Female		
Name (as written o	n passport- *attach	сору)					
			Family		First	Middle	
Date of Birth				Place of Birth			
	Month/Day/Year				City, Country		
Country of citizenship			Co	Country of legal permanent residence			
Dependent #3:	Spouse	Child	/	☐Male	Female		
Name (as written o	n passport- *attach	сору)					
			Family		First	Middle	
Date of Birth				Place of Birth			
	Month/Day/Year				City, Country		
Country of citizenship			Co	untry of legal per	manent residence		
Dependent #4:	Spouse	Child	/	□Male	Female		
Name (as written o	n passport- *attach	сору)					
			Family		First	Middle	
Date of Birth				Place of Birth			
	Month/Day/Year				City, Country		
Country of citizenship			Co	Country of legal permanent residence			