Frank Phillips College International Applicant  
Financial Statement Form

U.S. immigration laws require that all international applicants verify financial support. International students must show adequate financial resources to provide for educational and living expenses while studying in the United States. Frank Phillips College does not have scholarships available for international students aside from those awarded for athletics.

This form must be completed before a Form I-20 will be issued.

1. Applicant Name: ____________________________________________
   Family Name (Surname)  Given Name(s)

2. Applicant Date of Birth:  Month _____________________________  Date __________  Year __________

SPONSOR INFORMATION (To Be Filled Out By Sponsor)

I, ____________________________________________________________, make oath and state as follows:
   (Name of Sponsor)

   a. I am the _________________________________ of Mr./Mrs./Ms. _________________________________
      (Relationship)  (Name of Student) who has applied for admission to Frank Phillips College.

   b. I will meet all educational, living, and miscellaneous expenses of the above-named applicant.

   c. I am currently employed by _____________________________________________________________, and my annual
      income is equivalent to U.S. $________________.

   d. I have attached an original bank letter (not more than two months old) confirming a minimum CURRENT
      BALANCE of $12,694 U.S. dollars as an estimate of pre-arrival expenses and the first year of attendance.

   e. Associate degree programs at Frank Phillips College generally take two years to complete. Please plan to provide
      adequate funding for at least two years of enrollment.

   f. Frank Phillips College requires that international applicants deposit the full amount of the estimated average cost
      of attendance one month prior to the first class day of each school year. The current estimated average cost of
      attendance for one year is $10,694. This amount does not include money for the student’s personal expenses.
      Any athletic scholarship awarded may be subtracted from this amount for financial planning purposes.

   OATH OF SPONSOR

By my signature below, I affirm that the above statements are true and correct.

Sponsor’s Printed Name: __________________________Signature________________________________

Home Address: _____________________________________________________________________________

City: __________________________State/Province: __________________________

Postal Code: __________________________Country: __________________________

Telephone Number: __________________________Email: __________________________

*This form must be fully completed.