



# INTERNATIONAL PROGRAMS

## Financial Awareness Form

Student Name: \_\_\_\_\_  
 (Last/Family Name or Surname) (First/Given Name)

**Required Funds:** All costs are approximate and subject to change each college school year.

Tuition/Fees	\$ 5,872.00	← This <b>WILL</b> be charged by NWACC
Health Insurance	\$ 945.00	← This <b>WILL</b> be charged by NWACC
Textbooks	\$ 1,000.00	← This is <b>NOT</b> charged by NWACC
Room/Board	\$11,205.00	← This is <b>NOT</b> charged by NWACC
<b>Total Annual Cost</b>	<b>\$19,022.00</b>	

J-1 Scholars Applicants: Exempt of Tuition/Fees and Textbooks. Adjusted number = **\$12,150**  
 Additional Expenses for Dependents: You must show sufficient funds to cover any dependents' living expenses while in the United States. The yearly addition for a non-student spouse is **\$5,700.00** and **\$4,000** for each child.

- I will **NOT** bring a spouse nor children to the United States on an F-2/J-2 Visa.  
 I **WILL** bring a spouse and/or children to the United States on an F-2/J-2 Visa. \_\_\_\_\_ **Dependent**

Please Indicate in U.S. Dollars (USD) the amount of money that will be available to you annually from the sources specified below, and **provide the appropriate supporting documentation(s)**. A Certificate of Eligibility (Form I-20/DS-2019) may only be issued when the student shows satisfactory financial arrangements for meeting the expenses of his/her program of study.

<b>Student Applicant Personal Funding</b> ( <i>funds from applicant</i> )	\$
<b>Sponsor/Family Guarantor Funding</b> ( <i>funds from a third party individual</i> )	\$
<b>Home Government Scholarship</b> ( <i>funds from home country government</i> )	\$
<b>Total Available Funds for Education:</b>	\$

This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate statement, and that the funds are available and will be provided as indicated. I also understand that this sponsorship is an altruistic act and I do not expect any services/work from the student as a result of payment. I will assist the International Programs Center in maintaining good status with this student/scholar.

Name of Sponsor/Family: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Signature of Guarantor: \_\_\_\_\_ Country of Residence: \_\_\_\_\_

**By signing my name to this form, I certify that the information I have given is a correct statement of my arrangements for financing my studies at NWACC.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You must submit proof of financing with this form to [InternationalAdmissions@nwacc.edu](mailto:InternationalAdmissions@nwacc.edu).  
 Any questions may be directed to that email or 479-986-4069