## INTENSIVE LANGUAGE PROGRAM (ILUNO)

**FINANCIAL AFFIDAVIT**

For ILUNO Students Only: Estimated Expenses for the 2016-2017 Academic Year

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition***</td>
<td>$3,290</td>
</tr>
<tr>
<td>Fees</td>
<td>$384</td>
</tr>
<tr>
<td>Books and Supplies</td>
<td>$300</td>
</tr>
<tr>
<td>Room and Board</td>
<td>$3,963</td>
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<td>Personal Expenses****</td>
<td>$1,614</td>
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<tr>
<td>Health Insurance</td>
<td>$694</td>
</tr>
<tr>
<td>TOTAL:</td>
<td>$10,245</td>
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**2016-17 ESTIMATED EXPENSES – 16 WEEKS (2 SESSIONS)**

- **Tuition***: $3,290
- **Fees**: $384
- **Books and Supplies**: $300
- **Room and Board**: $3,963
- **Personal Expenses******: $1,614
- **Health Insurance**: $694
- **TOTAL**: $10,245

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**THIS SECTION TO BE COMPLETED BY THE APPLICANT**

Name

Family/Last Name  
Given/First Name  
Middle Initial (optional)

NUID Number  
Other names used

Email Address

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**SOURCES OF SUPPORT**

Current documentation from each source must be provided. Bank documents are valid for 6 months from the start date of your program. Keep original documentation to present to immigration offices.

**First-Year Amount**

- **Personal Savings**: $_____

  - Name of Your Bank: ______
  - Location of Bank: ______

- **Personal Sponsors** (family members and others): All sponsors are required to complete Part 2 of this form and provide current bank statements. Use additional copies as needed. Students in the U.S. may not act as sponsors.

  - Sponsor #1: ______
    - Name: ______
    - Relationship to You: ______

  - Sponsor #2: ______
    - Name: ______
    - Relationship to You: ______

- **Sponsoring Organization** (home government, international organization, university, employer, etc.):

  - $_____

  Attach current official letter of award addressed to UNO, which includes terms of support, specific amount of support, and period of time covered by the grant.

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**APPLICANT’S STATEMENT**

I certify that I will have a minimum of U.S. $10,245.00 available to me for each 16-week period I study in ILUNO.

I am prepared to fund my program of studies on the basis of my present resources (certified on this occasion) without relying upon future potential sources that have not materialized.

Applicant’s Signature  
Date

Parent Signature (if under 19 years of age)  
Date

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The University of Nebraska at Omaha (UNO) shall not discriminate based upon age, race, ethnicity, color, national origin, gender-identity, sex, pregnancy, disability, sexual orientation, genetic information, veteran’s status, marital status, religion, or political affiliation. 0154FORMISP0816 Revised September 2016.
List all dependents who will travel with you to the United States.

<table>
<thead>
<tr>
<th>Family Name</th>
<th>Given Name</th>
<th>Date of Birth</th>
<th>Country of Birth</th>
<th>Country of Citizenship</th>
<th>Spouse, Son, or Daughter</th>
</tr>
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</table>

**ABOUT THE SPONSOR**

**SPONSOR’S CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Relationship to Applicant</th>
<th>Country of Citizenship</th>
<th>Email</th>
<th>Phone (if in U.S.)</th>
<th>Mailing Address</th>
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If you are not a U.S. citizen and you have a U.S. address:

Visa Type: ____________________________

Are you a student? ☐ Yes ☐ No

**SPONSOR’S BANK**

Name of Bank: ________________________________

Location of Bank: ________________________________

All financial documentation should be photocopied and original documents made available to the student when arranging visas at the American Consulate.

**SPONSOR’S BANK**

I hereby guarantee without reservation to maintain and support (student’s name) ___________________________ for educational costs and living expenses while this student is enrolled in ILUNO. I understand that the applicant, if accepted to ILUNO, will be a full-time student who may not accept off-campus employment unless permission is granted. This permission is hard to obtain and must not be assumed to be available.

I hereby promise to provide (amount) U.S. $ ___________________________ for the first year of study. I will arrange to provide a major portion of the money to the student at the time of arrival to include housing costs, insurance, books, and tuition.

I certify that the information and guarantee provided on this page is accurate, complete, and true. Any information given falsely or withheld will affect the decision on the student’s application and may make the student ineligible for enrollment.

I am attaching a current statement from my bank attesting to my financial status.

Sponsor’s Signature: ___________________________ Date: ____________

Applicant’s Signature: ___________________________ Date: ____________