

INTENSIVE LANGUAGE PROGRAM (ILUNO) FINANCIAL AFFIDAVIT

For ILUNO Students Only: Estimated Expenses for the 2025 - 2026* Academic Year

2025-26 ESTIMATED EXPENSES - 16 WEEKS (2 SESSIONS)**

\$4,212	luition***
\$ 786	Fees
\$1,537	Health Insurance
\$ 400	Books and Supplies
\$6,528	Room and Board
\$2,083	Personal Expenses****

\$15,546 ****

TOTAL:

- * This budget covers a 16 week period for a single student living on campus enrolled in ILUNO full-time (18 hours per session). Students may anticipate an increase in the estimated cost each year. This does not include travel expenses to and from the U.S.
- ** All figures are estimate and subject to change without notice. This estimate of expenses does not include transportation to and from Omaha.
- *** Transfer students may be able to pay tuition for 8 weeks.
- **** Actual personal expenses will vary based on lifestyle. Personal expenses DO NOT include money for cultural activities and/or souvenirs.
- ***** When a spouse and/or children are accompanying the student to the United States, students are required to demonstrate additional support: \$2,750 for the each dependent. This needs to be added to the estimated total listed above.

THIS SECTION TO BE COMPLETED BY THE APPLICANT All fields required.

Name			
Family/La	st Name	Given/First Name	Middle Initial (optional)
NUID Number		Other names used	
Date of Birth ———	Email Address		
SOURCES OF	SUPPORT All fields required.		
	k Documents must be signed, stamped		nust submit original Bank documents including an cuments must be current or within 6 months from
	Personal Savings		
\$ Personal Savings Amount	Name of Your Bank	Loca	rtion of Bank
		mbers and others): All sponsors are requ s. Use additional copies as needed. Stud	uired to complete Part 2 of this form dents in the U.S. may not act as sponsors.
\$	Sponsor #1		
Personal Sponsor 1 Amount	Name		Relationship to You
\$ Personal Sponsor 2 Amount	Sponsor #2Name		Relationship to You
\$	letter of award addressed to UNO, grant.	which includes terms of support, specifi	zation, university, employer, etc.) Attach current official c amount of support, and period of time covered by the
Sponsoring Organization Amount	Name of Sponsoring Organizati	on	
APPLICANT'S	STATEMENT All fields required.		
I certify that I will ha	ve a minimum of U.S.\$15,546 ava	ilable to me for each 16-week perio	od I study in ILUNO.
I am prepared to pay for is uncertain.	or my program of study using current	y available funds. I will not rely on any	future or potential funding because it
Applicant's Signature			Date
Parent Signature (if under 19 y	vears of age)		Date

Office of International Admissions | 111 EAB, 6001 Dodge Street, Omaha NE 68182-0080 | 1.402.554.2293 | unointernational@unomaha.edu | admissions.unomaha.edu



INTENSIVE LANGUAGE PROGRAM (ILUNO) Nebraska Omaha FINANCIAL AFFIDAVIT

For ILUNO Students Only: Estimated Expenses for the 2025 - 2026* Academic Year

List all dependents who will travel with you to the United States.

Family Name	Given Name	Date of Birth	Country of Birth	Country of Citizenship	Spouse, Son, or Daughter

Applicant: If you are receiving sponsored support, then all fields below must be filled out.

If your support is coming from your own personal funds, then it is not necessary to complete this section.

ABOUT THE SPONSOR	SPONSO	SPONSOR'S CONTACT INFORMATION			
Full Name	Email	Email Phone (if in U.S.) Mailing Address			
Relationship to Applicant	Phone (if in U.S.)				
Country of Citizenship	Mailing Addres				
If you are not a U.S. citizen and you have a U.S. address: Visa Type:					
Is you r sponsor an F1 student? ☐ Yes ☐ No	City	State/Providence	Postal Code		
SPONSOR'S BANK	Country				
Location of Bank All financial documentation should be photocopied and original should be photocopied and			as at the American Consulate.		
I hereby guarantee without reservation to maintain and support (<i>studen</i> costs and living expenses while this student is enrolled in ILUNO. I undenot accept off-campus employment unless permission is granted. This p	erstand that the applicant,	, if accepted to ILUNO, will be	a full-time student who may		
I hereby promise to provide (<i>amount — required</i>) U.S. \$a major portion of the money to the student at the time of arrival to inc	•				
I certify that the information and guarantee provided on this page is ac Any information given falsely or withheld will affect the decision on the			ole for enrollment.		
I am attaching a current statement from my bank attesting to my finan	ncial status.				
Sponsor's Signature		Date			
Applicant's Signature					

Office of International Admissions | 111 EAB, 6001 Dodge Street, Omaha NE 68182-0080 | 1.402.554.2293 | unointernational@unomaha.edu | admissions.unomaha.edu