The United States Department of Homeland Security (DHS) regulations require documentation that sufficient financial resources are available to meet a student’s prospective educational and living expenses while in the U.S. Therefore, Evangel University requires a guarantee of financial resources from each applicant who expects to obtain or maintain Student (F-1) status.

WHAT YOU NEED TO KNOW:

- Applicants are required to submit financial documentation that equals or exceeds one full year of expense for the program of study they are interested in pursuing.
- Adjustments in the financial certification cannot be made based on a student’s individual circumstances. This estimate is based upon a full-time course load each semester. SEVP considers 12 credit hours as full-time for undergraduate students and varies for graduate studies (see the International Student Coordinator).
- Financial documentation is valid for six months from the date of signature on this form or date of bank statement submitted.
- Although scholarships are available for qualified international students, they may not cover a good portion of tuition and in most cases may not be relied upon to cover all educational costs. For more information regarding scholarship opportunities available at EU/AGTS, please visit https://www.evangel.edu/financial-aid-and-scholarships/

APPLICANT'S CERTIFICATION

Applicant’s Name
(Please print) (Family/Last) (Given/First) (Middle)

Expected enrollment date: □ Spring (January) 20__ □ Summer (May) 20__ □ Fall (August) 20__

I guarantee that I will have sufficient funds available to meet the estimated educational expenses for each year that I study at EU/AGTS. I certify that I can make necessary arrangements to have all funds transferred to the United States and that I will have adequate funds for my travel to and from the United States. I understand that tuition is payable at the beginning of each semester. These funds of $__________ per year will be provided by [check one]:

□ My Family □ My Own Savings □ Other (specify) ______

If you are married and your spouse and/or children will accompany you to the U.S., please provide the following information for each individual. Additional funds must be added to the financial guarantee form to support your dependents amounting to $6,000 for a spouse and $4,000 for each child.

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Signature __________________________ Date ______________________

International Student Office | +1 417-268-1041 | fax 417-575-5465 | mooreda@evangel.edu
GUARANTOR’S CERTIFICATION

Unless you are supported by your own savings, immigration documents will not be issued without the guarantor completing and signing this section.

Guarantor’s Name ________________________________________________ Relation to Applicant: __________________
(Please print) (Family/Last) (Given/First)

Guarantor’s Country of Citizenship _______________________________________________________________________________

Is the Guarantor currently residing in the United States? □ Yes □ No
If yes, is the Guarantor a U.S. citizen? □ Yes □ No
If no, is the Guarantor a Permanent Resident Alien? □ Yes □ No

If the Guarantor is residing in the U.S. and is not a U.S. citizen or Permanent Resident Alien, What is his/her current visa classification? ___________________________________________________

As the applicant’s guarantor, I understand that expenses listed on the International Cost of Education Sheet of $ _______________ are estimates of the average cost. The actual cost may vary based on changes in tuition and fees, books and supplies, room and board, medical insurance premiums and personal lifestyles. I guarantee that I will provide (Name of applicant) ___________________________________ with sufficient funds to meet the actual expenses incurred, as estimated above, for each year the applicant is enrolled at EU/AGTS. I certify if there are dependents that plan to accompany the applicant, I will provide the additional funds necessary to meet the needs of the applicant’s dependents. I certify that I can make the necessary arrangements to have all funds transferred to the United States and that I will provide adequate funds for the applicant’s travel to and from the United States.

Mailing address of Guarantor: ___________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Signature of Guarantor: ___________________________________________________ Date: ________________________

BANK’S CERTIFICATION

If bank policies do not allow the completion of this form, a separate bank letter or affidavit is an acceptable substitute. The letter should be on bank letterhead, signed by a bank official and specifically verify the following:

• Name of account holder.
• Date account was opened.
• Current account balance or specific acknowledgment that accounts have a minimum balance to cover the student’s estimated expenses and any additional dependents as listed above.
• Monetary values should be converted to the U.S. dollar.

This is to certify that in our opinion, (Guarantor’s Name) __________________________________________________, the guarantor whose signature appears above, has adequate funds to meet the estimated expenses as listed above for the applicant and any dependents listed for each year that the above named applicant is enrolled at EU/AGTS. This certificate does not constitute a statement of liability on any part or on behalf of the bank incurred by the applicant named above.

Signature: ____________________________________________________________

Title or Organization ______________________________________________
Address: __________________________________________________________
____________________________________________________________________
____________________________________________________________________

Bank seal or stamp

Date: __________