

APPLICANT: Please provide name (Last, First, Middle)

Confidential Financial Statement

Please mail to: UCLA
 Department/School of _____
(APPLICANT: Please fill in name and address of program to which you are applying.)
 Box _____
 Los Angeles, CA 90095- _____ (Zip + 4 must be completed)

Complete this form only if you will need an I-20 Certificate of Eligibility for an F-1 student visa or DS-2019 Certificate of Eligibility for a J-1 exchange visitor visa. While there are no restrictions on the source of funds for applicants for F-1 visas, applicants for J-1 visas must show funds coming from specific sources (e.g. applicant's home government, international organizations or UCLA). Complete both pages of this form carefully and accurately. Print or type all information *except* signatures. **Signatures and bank stamps must be included to validate the form.**

Applicant Information

Give your name exactly as it appears on your passport and the UCLA Application for Graduate Admission.

Family Name _____ First Name (only) _____
 UCLA ID Number _____ Date of Birth _____
if known *month/day/year*

Source of Funds

Complete Sections A, B, and C as they apply to you. Indicate amounts in U.S. Dollars.

Section A Family or Individual Sponsor's Funds

Amount of funds to be provided by family member or sponsor U.S. \$ _____

Sponsor's Guarantee

"I _____, _____ guarantee that the
signature *please print full name*
 funds indicated in Section A will be available for the applicant listed for the first year of education at UCLA."

Address _____ Occupation _____
 _____ Relationship to Applicant _____

Bank Verification

"This is to certify that the sponsor listed in Section A is financially capable of meeting his/her commitment as indicated in Section A and if the funds are outside the U.S., the government has no restrictions regarding the release of funds."

Signature of Bank Official _____ Bank Stamp
 Title _____ Date _____
 Address _____

Section B Sponsoring Organization, Firm or Government

Name of Sponsoring Party _____ Amount to be provided U.S. \$ _____

Attach an original signed copy of terms of support that specifies the amounts provided for tuition and/or living expenses and year(s) covered by the award.

Section C Personal Funds

Amount of personal funds you will have available (not otherwise indicated on this form) U.S. \$ _____

Bank Verification

"This is to certify that the person named above, who is applying for graduate admission at UCLA, has on account the amount indicated in Section C and that if the funds are outside of the U.S., the government has no restrictions regarding the release of funds."

Signature of Bank Official _____ Bank Stamp
 Title _____ Date _____
 Address _____

Total Amount of Funding from All Sources (total of Sections A, B, and C) U.S. \$ _____

You must complete and sign the second page of this form.

Additional Financial Information

While attending UCLA, will you live free of charge with friends or relatives? Yes No

If yes, the responsible person must sign the statement below.

"I _____, _____ guarantee that the
signature *please print full name*
room and board will be provided by me at no cost to the above named applicant."

Address _____ Occupation _____
Relationship to Applicant _____

Residency Information (Required)

City of Birth _____ Country of Birth _____

Country of Citizenship _____ Visa you now have (if applicable) _____ Visa you expect to receive _____

Mailing Address _____

Dependents

List all the dependents who will be accompanying you to the U.S. This information will be included on the Certificate of Eligibility and will be needed to obtain visas for them. Give each name exactly as it appears on the passport. Separate each part of the name with a comma (e.g., family name(s), first name(s), middle name(s)).

Name as it appears on passport (Family name(s), first name(s), middle name(s))	City and Country of Birth	Date of Birth (month/day/year)	Country of Citizenship	Husband, wife, son or daughter (specify)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Signature of Applicant

Please read the statement below and sign.

"I certify that I have considered each question carefully and that my statements are true and complete to the best of my knowledge. Further, I understand that enrollment in the University of California may be denied if any information is found to be incomplete or inaccurate. If any change in my financial situation occurs, I will notify Graduate Admissions/Student & Academic Affairs at once."

Signature of Applicant _____ Date _____