

Department of Recruitment and Admissions

11300 NE 2nd Avenue, Miami, FL 33161 USA P: 305.899.3100 or 1.800.695.2279 F: 305.899.2971 | gradadmissions@barry.edu

Financial Affidavit of Support for International Graduate Students Physician Assistant Program

All international applicants requiring the I-20 Certificate of Eligibility Form must complete this financial affidavit. You are required to certify that you will have adequate financial support for one academic year of study at Barry University. A Certificate of Eligibility (I-20) will not be issued until this form is completed and an original bank letter is submitted from your sponsor(s) and returned to the Division of Enrollment Services at the above address.

If financial support is to be provided by one or more sponsors, please note that the individual(s) must certify the affidavit on the enclosed form.

Please obtain two originals of your bank letter and financial affidavit of support. You will need to retain an original of each financial document for your own records. You will be required to show these documents to the U.S. Consulate when applying for your student visa as well as to immigration officials upon entering the U.S. Acceptable financial verification must be dated no more than one year prior to the start of your first semester.

Expenses	U.S. Dollars	Source of Support (self or sponsor)
Tuition	\$39,000	
Books, Supplies, Health Insurance, and Fees	\$8,596	
Housing, Living Expenses, Transportation	\$42,920	
Total	\$90,516	
Scholarship/Grant Award (if applicable)		
Academic Award	-\$	
Athletic Award	-\$	
Dependents (add \$2,500 per person)	+\$	
TOTAL		
I certify that I have (insert amount from above) graduate study at Barry University.		
Signature		Date
		Plontin Bate Tear
NameFirst		Last/Surname
Address	Street	
City	State	Country ZIP/Postal Code
Telephone(Please include country and city international	calling codes) Email	

Please be aware that false information may result in the cancellation of your admission to the University.

Barry University does not discriminate on the basis of race, creed, color, ethnicity, national origin, ancestry, religion, gender, sexual orientation, gender identity, genetic information, familial status, marital status, pregnancy, age, disability status or veteran status. Barry University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award baccalaureate, masters, specialist, and doctoral degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Barry University.

Sponsor Affidavit of Support

To be completed by Sponsor 1				
I certify that I am willing and able to sponso	or			
with a minimum amount of(insert amount)	in U.S	insert studer 5. dollars	dated and signed by a bank official no	
more than six months before the student's	enrollment at	Barry Un	iversity, indicating savings account	
funds to sponsor the student.				
Signature	_ Date	Day Va	Relationship to Student	
Name	MONTH	Day re	Sponsor's Citizenship	
	Email			
(please print) Fax				
(including country and city code)				
This form may be reproduced				
Spoi	nsor Affidavı	it of Sup	port	
To be completed by Sponsor 2				
I certify that I am willing and able to sponso	or	(insort studo	at's name)	
with a minimum amount of(insert amount)	in U.S	6. dollars	dated and signed by a bank official no	
more than six months before the student's	enrollment at	Barry Un	iversity, indicating savings account	
funds to sponsor the student.				
Signature	_ Date	D V	Relationship to Student	
Name(please print)				
Address			Email	
(please print)	Teler	phone	(including country and city code)	
(including country and city code)			(including country and city code)	
This form may be reproduced				
Spon	sor Affidavi	t of Sup	port	
To be completed by Sponsor 3				
certify that I am willing and able to sponso	r	(insert studen	t's name)	
with a minimum amount of	in U.S.	. dollars c	lated and signed by a bank official no	
more than six months before the student's e	nrollment at l	Barry Uni	versity, indicating savings account	
funds to sponsor the student.				
Signature	_ Date	Day Yea	Relationship to Student	
Name(please print)		,	Sponsor's Citizenship	
Address(please print)		E	Email	
(please print) Fax		hone		
(including country and city code)			(including country and city code)	