

**Applicant Name:** 

## INTERNATIONAL **PROGRAMS**

## **Financial Awareness Form**

|                                                                                                                                                                                                              | (Last/Family Name or Su | rname) (First/Given Name)                                                                    |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------------------------------------------------------------|--|--|
| Date of Birth:                                                                                                                                                                                               | City of Birt            | h: Country of Birth:                                                                         |  |  |
| Required Funds:                                                                                                                                                                                              | All costs are appro     | ximate and subject to change each college school year                                        |  |  |
| Tuition/Fees<br>Health Insurance                                                                                                                                                                             | \$ 6,421<br>\$ 1,048    | Expected Tuition/Fee Cost – Minimum 12 credits Annual Cost charged in portions each semester |  |  |
| Textbooks                                                                                                                                                                                                    | \$ 1,200                | Projected Textbook Cost                                                                      |  |  |
| Room/Board                                                                                                                                                                                                   | \$ 18,600               | Cost of Living estimate for Northwest Arkansas                                               |  |  |
| Total Annual Cos                                                                                                                                                                                             | st \$ 27,269            | Needed to be Accepted                                                                        |  |  |
| J-1 Scholars Applicants: Exempt of Tuition/Fees and Textbooks. Adjusted number = <b>\$19,648</b> Additional Expenses for Dependents: You must show sufficient funds to cover any dependents' living expenses |                         |                                                                                              |  |  |

while in the United States. The yearly addition for a non-student spouse is \$5,800 and \$4,000 for each child.

| Applicant Declarations                                                                 |  |           |
|----------------------------------------------------------------------------------------|--|-----------|
| Will you need additional I-20's for a Spouse and/or Dependents for an F-2 Visa?        |  | Yes<br>No |
| Do you have a Financial Guarantor whom will help you meet the costs of your education? |  | Yes<br>No |
| Do you have Room/Board provided by a Financial Guarantor in Northwest Arkansas?        |  | Yes<br>No |

(Note: A Financial Guarantor is an individual whom is willing to provide financial/living expense support without any expectations of duty from applicant)

Please Indicate in U.S. Dollars (USD) the amount of money that will be available to you annually from the sources specified below. A form I-20 or DS-2019 may only be issued when the student shows satisfactory financial arrangements for meeting the expenses of his/her program of study and the cost of living of Northwest Arkansas

| Forms of Funding                       | Explanation                                                                          | Amounts |
|----------------------------------------|--------------------------------------------------------------------------------------|---------|
| Applicant Personal Funding             | funds from applicant's own accounts                                                  | \$      |
| Financial Guarantor Education Funding  | funds from a third party individual<br>Tuition/Fees, Textbooks, and Health Insurance | \$      |
| Financial Guarantor Room/Board Funding | funds from a third party individual                                                  | \$      |
| Home Government Scholarship/Award      | funds from home country government                                                   | \$      |
| Total Available Funds for Education:   |                                                                                      | \$      |

\*\*\* Evidence is Required \*\*\* Personal Funding or Guarantor Education Funding requires bank statement from account owner and show

Financial Guarantor Room/Board Funding requires a letter from home owner/tenant that shows the following Information: Length of Stay in Date Format, Address, Signed by Guarantor

the following information: Currency, Date, Amount, Letterhead, Account Number

Home Government Scholarship/Award requires award letter with the following information: Name, Amount, Semester

Any questions may be directed International Admissions@nwacc.edu.



## INTERNATIONAL PROGRAMS

| Dependent Disclosures | Gender | Date of Birth | Place of Birth |
|-----------------------|--------|---------------|----------------|
| Name:                 | M F    |               |                |
|                       |        |               |                |

(Note: If additional space is needed for dependents, please email detailed list to InternationalAdmissions@nwacc.edu)

| Financial Guarantor Education Funding Signature                                                                                                                                                                                                                                                                                                                                                                                                            |                            |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--|--|--|
| This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate statement, and that the funds are available and will be provided as indicated. I also understand that this sponsorship is an altruistic act and I do not expect any services/work from the student as a result of payment. I will assist the International Programs Center in maintaining good status with this student/scholar. |                            |  |  |  |
| Print Name of Guarantor 1:                                                                                                                                                                                                                                                                                                                                                                                                                                 | Relationship to applicant: |  |  |  |
| Signature of Guarantor 1:                                                                                                                                                                                                                                                                                                                                                                                                                                  | _Country of Residence:     |  |  |  |
| Print Name of Guarantor 2:                                                                                                                                                                                                                                                                                                                                                                                                                                 | Relationship to applicant: |  |  |  |
| Signature of Guarantor 2:                                                                                                                                                                                                                                                                                                                                                                                                                                  | _Country of Residence:     |  |  |  |
| Print Name of Guarantor 3:                                                                                                                                                                                                                                                                                                                                                                                                                                 | Relationship to applicant: |  |  |  |
| Signature of Guarantor 3:                                                                                                                                                                                                                                                                                                                                                                                                                                  | Country of Residence::     |  |  |  |
| Applicant Signature                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |  |  |  |
| By signing my name to this form, I certify that the information I have given is a correct statement of my arrangements for financing my studies at NWACC in Northwest Arkansas.                                                                                                                                                                                                                                                                            |                            |  |  |  |
| Applicant Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                       | Date:                      |  |  |  |