



CONFIDENTIAL
Declaration of Certification of Finances
2020-2021

A Certificate of Eligibility (Form I-20) will not be authorized until this form is completed and returned to Converse College.

ESTIMATE OF YEARLY COSTS AT CONVERSE COLLEGE

Tuition and Fees: _____	Other: Personal _____
Room and Board: _____	Matriculation _____
Miscellaneous _____	Transportation _____
Other: Books _____	

I, _____, certify that the total amount of money (excluding travel funds) minimally available to me for my first academic year at Converse College is **US \$** _____ and that the total amount minimally available for each subsequent year of study is **US \$** _____.

Please indicate the source of funds in the chart below. If the amount available to you is less than the minimum requirements given above, explain on a separate sheet of paper how you plan to fund your study at Converse College. Official certification is required for each source of funding. If you need more copies, this form may be electronically reproduced.

Assured amount in US Dollars (\$)

Source	First Year	Second Year	Third Year	Fourth Year
Personal Savings Name of Bank/Bank Official's signature required below	\$	\$	\$	\$
Family and/or Friend Signature required below	\$	\$	\$	\$
Government Signature required below Name of agency:	\$	\$	\$	\$
Other Converse Scholarships	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

Enter the total amount of money you expect to have when you arrive at Converse College in USD\$.	\$	\$	\$	\$
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OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement and that the funds are available.

BANK OFFICIAL'S SIGNATURE _____

TITLE _____

NAME OF BANK _____

ADDRESS OF BANK _____

DATE _____

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement and that the funds are available.

GUARANTOR'S SIGNATURE _____

RELATONSHIP TO APPLICANT _____

ADDRESS _____

DATE _____

I certify that the information provided is true, correct and complete.

STUDENT'S SIGNATURE _____

DATE _____