

1725 Bear Valley Pkwy Escondido, CA 92027-4128 888/480.8474 • FAX 760/480.0252 www.wscal.edu

## CERTIFICATE OF ELIGIBILITY (I-20) APPLICATION

## **Application Checklist:**

- ☐ Submit WSC Financial Support Agreements to all sponsoring individuals, churches and/or agencies with the understanding that the sponsor will send the form directly to WSC Office of Admissions.
- ☐ All sponsoring individuals, churches, and/or agencies (including the student) must submit proper financial documentation of their available resources (e.g. bank account balance statements)

In order to receive a Certificate of Eligibility for Nonimmigrant (F-1) Student Status (I-20), the student must submit this application along with proper documentation of his or her financial resources. So that we may properly document these resources, each sponsoring individual and/or agency must complete and submit the WSC Financial Support Agreement form together with any applicable financial documents. WSC cannot process your Certificate of Eligibility (I-20) until all Financial Support Agreements and documentation have been received. *Note:* If you are currently studying in the U.S. and would like to transfer your visa to WSC, please complete the International Student Transfer Form in lieu of this form.

Applicant's Name:						
Current Mailing Address:	LAST		FIRST		MIDDLE	E
G	TTY		STATE		ZIP C	ODE
-	****			Email:		
Date of birth (month/day/year):						
Country of citizenship:			Country of residency:			
Semester/year for which you plan to enroll at WSC:			Date of arrival to the U.S.:			
Spouse's Name (if applicable	e):	LAST (FAMIL)	V)	EDCT		MIDDLE
Date of birth (month/day/year):						
Country of citizenship:			Will he/she be accompanying you to the U.S.? (Y/N):			
Please print the names and in	nformation of y	our child/ren	below:			
NAME	DATE OF BIRTH	CITY AND COUN	TRY OF BIRTH	COUNTRY OF CITIZEN	NSHIP	ENTERING U.S? (Y/N)

## **Financial Resources**

Because Westminster Seminary California does not provide financial assistance beyond tuition expenses, international students must be prepared to provide documentation of adequate financial resources to support their personal living expenses as well as any applicable tuition costs. Please review the suggested financial budget, below, and insert your own calculations in the right column.

CATERGORY	SINGLE STUDENT	MARRIED	MARRIED WITH CHILDREN**	YOUR ESTIMATED EXPENSES
Books	\$800	\$800	\$800	
Housing & Utilities*	\$12,700	\$14,570	\$15,960	
Food	\$3,790	\$7,220	\$8,570	
Clothing & personal expenses	\$1,440	\$2,630	\$3,360	
Transportation	\$2,930	\$4,390	\$5,860	
Student Health Insurance	\$1,500	\$5,050	\$7,160	

			ommates should have significantly lower expenses. Included as a rough estimate only. Please use the space
If you have listed estimated expenses	above that are lower th	an those provided, please p	provide a brief explanation of why:
			the names and contact information of your d to use funds from your personal savings for
INDIVITUAL/GROUP NAME & CONTACT #	RELATIONSHIP TO YOU	ANNUAL AMOUNT OF SUPPORT	FREQUENCY OF SUPPORT (E.G. ONE-TIME, MONTHLY, ETC)
TOTAL AMOUNT OF ANNUA	L SUPPORT:		
understand that my Certificate of Elig	ibility (I-20) cannot be ımentation from me an er Seminary California	e processed until WSC has to ad my sponsors. I understan a and also against the U.S.	
	SIGNATURE		DATE
For Office Use Only:			
Financial Agreements Received:	DATE	Financial Documents Re	ceived: