Simmons College School of Social Work, Admission Office 300 The Fenway, Boston, MA 02115 Telephone: 617.521.3939 Fax: 617.521.3980

CONFIDENTIAL DECLARATION AND CERTIFICATION OF FINANCES INTERNATIONAL APPLICANTS

The Confidential Declaration and Certification of Finances (DCF) form is required of all incoming students who are not U.S. citizens or U.S. permanent residents. The DCF provides the necessary documentation to issue a Form I-20 for an F-1 Student Visa. Admitted students, who intend to enroll in the Simmons MBA program for the upcoming semester, should submit this form to the Admission Office upon receipt of their acceptance letter.

A Certificate of Eligibility (Form I-20 for an F-1 Student Visa or a Form IAP-66 for a J-I Exchange Visitor Visa) will not be issued unless this form is completed and the necessary certifications are obtained. It is suggested that you make copies of this form and required documents before returning them to Simmons College School of Social Work, as you will need to show proof of adequate funding to U.S. Consular officials when applying for a visa.

PART I: APPLICANT INFORMATION Applicant's Legal Name_ Last First Middle Initial Address (to which I-20/IAP-66 should be sent): Number Street City Phone State Zip/Postal Code Email Country Date of Birth____ Place of Birth_____ Country of Citizenship Country of Permanent Residence If you are presently in the U.S., describe your current immigration status (F, J, B, etc.) and enclose copies of your immigration documents (e.g. I-94, IAP-66, I-797, etc.) Are you currently studying in the U.S.? _____ If yes, please give the name of the school______. Marital Status:____single ____married. The information below is required for any dependents on your visa who will accompany you and remain with you during your time in the United States. Please note that you will need to provide evidence of \$250 per month per dependent for their support on the reverse side of this form. Name Relationship Date of Birth Place of Birth Citizenship (Last, First) to You (MM/DD/YY) (City/Country)

PART II: ESTIMATE OF STUDENT EXPENSES – Students who are in a program for more than one year will be required to submit an updated financial certification annually.

2003-2004	Tuition & Fees	Living Expenses	Books & Supplies	Total Expenses
Academic Year				
MSW Program	\$22,425 (fees: \$80	Room & Board	\$1000	\$36,025.00/per year
(\$690/credit; 65-	for year)	\$12,600		
credit program)				

PART III: SOURCES OF SUPPORT

Instructions: Complete the appropriate boxes to show sources and amounts of anticipated contributions to your educational and personal expenses while you are in the United States. For each source, follow the certification instructions in the box. Include anticipated contributions for each year of required study for your degree objective:

SOURCES OF FUNDS	ASSURED AMOUNTS IN U.S.	PROJECTED AMOUNTS IN U.S.
	DOLLARS – FIRST YEAR	DOLLARS – SECOND YEAR
PERSONAL SAVINGS:	\$	\$
An official letter from a bank, and a parent		
or sponsor's signature is required on the		
certification below if the student is		
supported in part or in whole by personal		
savings. See instructions below.		
YOUR GOVERNMENT:	\$	\$
Please print name of agency:		
Enclose with this form an original signed		
copy of your letter of award and a		
translation, if necessary.		
SIMMONS SCHOOL OF SOCIAL	\$	\$
WORK:		
Please print type of award:		
OTHER: Please specify:	\$	\$
Enclose with this form, an original signed		
copy of your letter of award and a		
translation, if necessary.		
TOTAL: Each of these totals should equal	\$	\$
the estimate of costs for one year on the		
Certificate of Expenses.		

OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS FOR PERSONAL SAVINGS

(Please complete sections #1 and #2)

1. BANK LETTER

You should obtain an original letter on bank stationary, which indicates availability of the necessary funds. This letter should include a confirmation of the necessary funds; the name and address of the bank; the date of the letter; and signature and title of a bank official. Please attach an official English translation of the bank letter.

2. GUARANTOR'S SIGNATURE

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 and will be provided as indicated.

GUARANTOR'S SIGNATURE	DATE	
GUARANTOR'S NAME (PRINTED)		
RELATIONSHIP OF GUARANTOR TO APPI	LICANT	
TELEPHONE		
ADDRESS		
APPLICANT: I certify that the above informat	ion is correct and complete.	
APPLICANT: I certify that the above informat	cion is correct and complete.	
APPLICANT: I certify that the above informat	cion is correct and complete.	
APPLICANT: I certify that the above informat Signature of applicant	cion is correct and complete. Date	
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Important: Issuance of documents may be compromised or delayed if the above information is not properly provided.