

Office of Admission
Simmons College Graduate School of Library and Information Science
300 The Fenway, Boston, MA 02115 USA
Tel. +1-617-521-2868 Fax +1-617-521-3192 Email gslisadm@simmons.edu

Declaration of Finances
Required Only for International Applicants (Non-US Citizens)

If you will not be a U.S. citizen or U.S. permanent resident immigrant at the time of application for admission, you must submit this form after you are admitted to the program. This information is needed in order to issue a Form I-20 to obtain an F-1 Student Visa to study at Simmons College.

A Certificate of Eligibility (Form I-20 for an F-1 Student Visa or a Form IAP-66 for a J-1 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 the GSLIS office, as you will need to show proof of adequate funding to U.S. Consular officials when applying for a visa.

Photocopies or facsimiles of this form are not acceptable. Original signatures are required. All statements must be in English and funds should be reflected in U.S. dollars (\$). Sources of support should not be more than six months old. **Monthly bank statements and separate currency tables are not acceptable. Please print or type clearly.**

Applicant Information

Last (Family or Surname)	First (Given)	Middle
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Address (to which I-20/IAP-66 should be sent; not a Post Office Box):

Number	Street	City	State/Province/Country
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Postal Code	Email (primary form of contact)
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Telephone (country/city or area code/number)	Fax (country/city or area code/number)
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Date of Birth (Month/Day/Year)	Country of Birth	Country of Citizenship
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Social Security Number (if applicable)	Driver's License Number and State of Issue
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Are you currently studying in the U.S.? Yes No

If yes, please give the name of the school _____

If presently in the U.S., describe your current immigration status: (F, J, B, etc.) _____

Please enclose copies of your immigration documents (e.g. I-94, IAP-66, I-797, etc.)

Please list below any dependents who will accompany you and remain with you during your study.

Name	Relationship	Date of Birth	Place of Birth	Citizenship
(Given, Surname)	to You	(Month/Day/Year)	(City/Country)	

