Graduate Student Services • 2540 Maile Way, Spalding 354 Honolulu, HI 96822 • Tel:808.956.8544 • Email: gradss@hawaii.edu • https://manoa.hawaii.edu/graduate/

Confidential Financial Information for International Applicants

United States federal immigration regulations (US State Department) require potential non-immigrant student visa holders to show financial documentation indicating sufficient financial resources for their academic studies in the United States. Applicants requiring the Form I-20 or Form DS-2019 for an F-1 or J-1 (student) visa/status must complete the Confidential Financial Statement form for International Students and submit supporting financial documents as proof of financial support.

The estimated cost of attendance budgets for advanced degree programs administered by the UH Mānoa Graduate Division are based on a 9-month normative budget. Budgets are based on minimum <u>full-time enrollment</u> of at least 8 credits per semester as defined by the Graduate Division (excluding summer), mandatory fees, and the cost of attendance as estimated by the UH System Office and UH Manoa Financial Aid Services. The cost of attendance includes food & housing for on-campus/off-campus living arrangements, books & supplies, local transportation, and personal expenses.

Expect to pay additional tuition if you enroll for more than 8 credits per semester or attend summer session classes. The rate of your tuition depends upon the graduate program you will be registered for. Information on the current tuition and fees for UH Mānoa is found at: https://manoa.hawaii.edu/registrar/tuition-fees/Graduate/. Note: All tuition and fee charges at the University of Hawai'i campuses are subject to change in accordance with requirements of State law and/or action by the Board of Regents or university administration.

An additional cost to consider which is not included in the normative budgets is mandatory health insurance. Health insurance coverage is mandatory for F-1 and J-1 international students. Additional information for health insurance is found at the International Student Services office webpage (https://www.hawaii.edu/issmanoa/?page_id=39) and the University Health Services webpage (http://www.hawaii.edu/shs/student_insurance/). This additional cost is not included in the budgets below but provided so that you may plan ahead for the expenses that you will incur. Your actual costs may vary depending upon your living arrangements and lifestyle. The following is the Estimated Cost of Attendance Budgets for the 2023-2024 Academic Year for the following programs:

Graduate Programs administered by UHM Graduate Division	Graduate Architecture	Graduate Nursing		
US\$45,248	US\$46,248	US\$53,152		

Documentation Required

The following documents are needed by the Graduate Division:

- 1. Completed Confidential Financial Statement Form for International Students
- 2. Copy of passport biodata page
- 3. Copy of bank statement of a savings account or a checking account
- 4. If you are sponsored by your government or a non-government organization, complete section D and submit a copy of your current award letter in English indicating the duration and amount of the award.

Bank Statement Documentation Requirements must meet the requirements below:

- Be recent, issued within 60 days at the time of submission
- Includes date of issuance
- Includes name of account holder
- Be a checking account or a savings account
- Be in English
- Be on official bank letter head
- Shows account balance (not average in the account) and type of currency

The following will not be accepted as financial support documents:

- Assets such as investments, stocks, bonds, equities, retirement accounts
- Statements verifying employment or salary
- Property or personal assets (land, buildings, jewelry, etc.)
- Lines of credit

If you are bringing dependents, provide a copy of each dependents' passport biodata page and additional funding of \$6000 per dependent above the amount required for yourself.

Submit your financial documentation via:

Email at gradss@hawaii.edu using the UH File-Drop Service (https://www.hawaii.edu/filedrop/)

CONFIDENTIAL FINANCIAL STATEMENT FORM FOR INTERNATIONAL STUDENTS

Graduate Programs administered by

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The following is the Estimated Cost of Attendance Budgets for the 2023-2024 Academic Year for the following programs:

UHM Graduate Division		Graduate Architecture		Graduate Nursing				
US\$45,248				US\$46,248	US\$53,152			
TYPE OR PRINT	CLEARLY. V	Where not appli	icable, write	"N/A".				
☐ Fall 2023	☐ Female	Intended Graduate Program					Degree Obj	ective
☐ Spring 2024	☐ Male							
A. STUDENT	INFORMATI	ON					·	
Legal Name								
Use names as listed on passport: Family/Last				First			Full Middle	
Email Address					Current Telepho	one		
Permanent Foreign	Address			City		State / Country	Po	ostal Code
Date of Birth		_City and Country o	of Birth		Country	intry of Citizenship		
Country Issuing Yo								
Occupation			Name of Em	If employed by home gove	ernment, indicate w	hether city, provincial c	or central governme	ent.
☐ I am self-spon	sored. Yearly a	mount of support i	n U.S. \$	Type of A	.ccount: □Ch	ecking Saving	ļs	
•	,			CERTIFICATION		0	,	
	ai'i at Mānoa. 🤇	Confirmation of the	e first year of so	es, living and any other e upport is provided as finan				
Student Signature						Date		
				names in the space below. pendents' biodata passpo		ncial evidence of	\$6,000.00 per	dependent
1	Name / Family Nar	<u> </u>	st Name	Place of Birth City and Country	Υ	Citizenship	Date of Birth MM/DD/YY	Gender Male or Female
Spouse								
Child								
Child								
Child								
C. FAMILY or	SPONSORS	SUPPORT						
Name of Sponsor:	·				Phone: _			
Address:								
Email:				Relationsh	ip to applicant	: 	· · · · · · · · · · · · · · · · · · ·	
Yearly amount of s	Yearly amount of student support in U.S. \$ Type of Account:							
				CERTIFICATION				
expenses for the c	duration of this s	student's enrollme	nt at the Unive	sible for the student indica rsity of Hawai'i at Mānoa. correct and complete to th	Confirmation of	of the first year of	support is prov	∕ided as
Printed NameSponsor Signature				Date	Date			
$f D.$ $\ \Box$ GOVERNMENT SPONSOR $\ \Box$ NON-GOVERNMENT ORGANIZATION (NGO) SPONSOR								
Name of Organization								
Submit a curren	t signed awar	d letter in Englis	h indicating tl	ne duration and amount	t of award.			