

SOUTHWEST COLLEGE OF NATUROPATHIC MEDICINE
& HEALTH SCIENCES



**Financial Guarantee
(For International Students Only)**

The United States Department of Justice, Immigration and Naturalization Service requires international students show proof of having adequate resources available to cover their expenses during their proposed period of study. Southwest College of Naturopathic Medicine & Health Sciences (SCNM) is obliged to determine your financial eligibility. Applicants to SCNM must have \$35,800 (US currency) available to cover expenses for each year of proposed study at SCNM. (Students accompanied by a spouse must anticipate additional living expenses of \$4,000 annually. An additional \$2,000 annually is required for each child.)

Please note: This Financial Guarantee and your bank statement are valid for only one calendar year. Proof of stock or securities holdings, insurance, property, available loans, retirement plans, US Government form I-134, or employment income are not acceptable financial support.

Please type or print:

Name <i>(as it appears on your passport):</i>	Social Security or Identification Card Number:
Mailing Address:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Planned Date of Enrollment: <i>(month/yr)</i>	Date of Birth: <i>(month/day/year)</i>
Birthplace:	Citizenship <i>(specify country):</i>
If already in US, what type of Visa do you have? <input type="checkbox"/> Student FI <input type="checkbox"/> Exchange Visitor (J1) <input type="checkbox"/> Other: _____	Occupation/employer:
If not currently in US, what type of Visa will you use while at SCNM? <input type="checkbox"/> Student FI <input type="checkbox"/> Exchange Visitor (J1) <input type="checkbox"/> Other: _____	Will you have dependents to accompany you? <input type="checkbox"/> Yes <input type="checkbox"/> No

Dependents:

Name	Relationship (spouse/children)	Date of Birth	Support Needed/Yr.
			\$
			\$
			\$
Total Dependent Support Needed:			\$
Basic Student Requirement:			\$ 35,800.00
Total Support Needed:			\$

Applicant's Statement: I certify that the Total Support Needed is available from (check all that apply):

- Personal Savings. You must attach a current statement from an officer of your bank or financial institution verifying that available funds on deposit equal the total support needed.

- Private Sponsor. I am willing and able to guarantee the financial support of the applicant for the duration of his/her university studies.

Relationship to applicant:	Signature:
Address:	Date:

- Scholarship (government, agency, university, etc.) Official written confirmation must be received before you will be admitted. The letter must bear a date within six months of your application, and must specify the amount, terms, and duration of the scholarship award.