

2019-20 INTERNATIONAL STUDENT FULL PAY AGREEMENT

DEADLINE: APRIL 1, 2019

☐ Female

☐ Male

Instructions: This form should be completed and returned with all supporting documentation to Calvin College, Office of Admissions and Financial Aid, 3201 Burton St. SE, Grand Rapids, MI 49546, U.S.A., by April 1, 2019. If you fax or email this form, it is not necessary to mail it. Fax: +1-616-526-6777, Email: intladm@calvin.edu

Any nondisclosure or omission of a substantive material fact or hiding of important information will result in the rescinding of financial aid awarded to the student and/or termination of the student's SEVIS record and I-20.

INFORMATION ABOUT THE STUDENT please type or print.

Name	Last/Family	First/Given		Middle			
Birthdate (M/D/YR)	Cour	ntry of Residence					
Home Address	Number and Street	City	State/Province	Postal Code/Zip	Country		
Mailing Address	Number and Street	City	State/Province	Postal Code/Zip	Country		
Citizenship		Email					
If currently in the U.S	S., what type of visa do	you hold?					
HOUSEHOLD INFOR	RMATION						
Are you currently man What is your parent(s)' current marital status:	☐ Married		rced □ Other □ Both Parents			
PARENT #1 □ Father □ Mother □] Stepfather □ Stepmoth	er □Guardian	PARENT #2	r □ Stepfather [∃Stepmother □ Guardian		
Last/Family	First/Given		Name	ily	First/Given		
Occupation/Title			Occupation/Title _				
Employer			Employer				
Length of Employmen	nt		Length of Employment				

ESTIMATED COLLEGE EXPENSES

The total estimated expense for the 2019-20 academic year is U.S. \$50,800 and is comprised of the following:

Tuition and Fees	\$36,000
Room & Board	\$10,500
Books & Supplies	\$1,300
Health Insurance	\$1,500
Personal	\$1,500

TYPE OF CURRENCY

Type of country currency	vused on bank statements:		

DOCUMENT CHECKLIST

Your file will not be considered for admission until the applicable documents on this checklist are provided. Documents should state type of currency. Provide the appropriate supporting documentation verifying your ability to cover the estimated college expenses for the first two years.

- Parent Income Statement(s)
- Parent Bank Statement(s)
- Student Bank Statement(s) (if applicable)
- Sponsor Letter of Intent (if applicable)
- Sponsor Bank Statement(s) (if applicable)

TERMS OF AGREEMENT

- This form is a declaration of your/your family's ability to meet Calvin College's full costs for the duration of your enrollment at the College. Students are responsible to cover college expenses not covered by financial aid and agree to cover increased tuition and room and board expenses each year of enrollment.
- The United States government requires students to prove economic solvency to acquire a student visa.
- Any nondisclosure or omission of a substantive material fact or hiding of important information will result in the rescinding of financial aid awarded to the student and/or termination of the student's SEVIS record and I-20.

CERTIFICATION AND AUTHORIZATION

We declare that the information on this form is true, correct, and complete. Calvin College has our permission to verify the information reported by obtaining documentation as needed.

WARNING: Providing false information may jeopardize a student's visa status and may result in Calvin College revoking its initial decision to admit or enroll the student.

Student Signature	Date
Parent/Stepparent/Guardian Signature	Date
Parent/Stepparent/Guardian Signature	Date
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Nondiscrimination Policy

Calvin College does not discriminate with regard to age, race, color, national origin, gender or disability in any of its educational programs or activities.