

DECLARATION OF FINANCES FOR INTERNATIONAL STUDENT ADMISSION

www.cornerstone.edu



Please note that this form is only for non-U.S.A. passport holders.

The International Student Scholarship Committee reviews all requests for financial assistance until March 30, 2020. **Forms submitted from October 1-March 30 are given optimal consideration for financial assistance.** Student immigration forms are issued only after admission is granted, financial resources are verified, and an enrollment deposit of \$200 USD is received. In addition, Cornerstone University requires a down payment of \$2800 for the first semester and for health insurance to be paid by July 1. All information may be reviewed by Cornerstone University, the U.S. State Department, and the U.S. Department of Immigration. Please make sure all the information is accurate, certified, and original documentation.

(Estimated*) All dollar amounts are in U.S. funds and anticipate a 4% increase each year. Total Tuition, Room and Board tend to increase anywhere from 2%-4% each year. Personal costs include airline fees and visa fees.

Cornerstone University Costs:	2019-2020*	2020-2021*	2021-2022*	2022-2023*
Tuition & Fees (estimated*)	\$25,360	\$26,374	\$27,428	\$28,525
Room & Board (estimated*)	\$9,630	\$10,015	\$10,415	\$10,831
Books (estimated*)	\$1,000	\$1,000	\$1,000	\$1,000
Health Insurance (estimated*)	\$1,300	\$1,300	\$1,300	\$1,300
Personal Costs (estimated*)	\$2,000	\$2,000	\$2,000	\$2,000
Total Annual Costs	\$39,290	\$40,689	\$42,143	\$43,656

Section A: Personal information - All applicants must submit this section

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LAST NAME	FIRST NAME	MIDDLE NAME
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COMPLETE HOME ADDRESS-NUMBER AND STREET	CITY
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ZIP/POSTAL CODE	COUNTRY	PHONE NUMBER
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CITIZENSHIP (PASSPORT)	COUNTRY OF BIRTH
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STUDENT E-MAIL	FAX NUMBER
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FATHER'S NAME	OCCUPATION
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FATHER'S EMPLOYER

MOTHER'S NAME

MOTHER'S EMPLOYER	OCCUPATION
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PARENT E-MAIL

MAILING ADDRESS, IF DIFFERENT THAN ABOVE

Section B: Financing your Cornerstone education

Please indicate which financial option you are pursuing:

We will fund all expenses related to Cornerstone University through private and personal resources.
(Please complete Section C only)

We are requesting financial aid from Cornerstone University.
(Please complete Section D only)

Section C: Complete this section if you DO NOT wish to be considered for financial assistance from Cornerstone University.

Funds available for the 2018-2019 year:

- 1) How much funding will your parents provide from their income?
(salary document must be attached) \$ _____
- 2) How much funding will your parents provide from their savings?
(bank document must be attached) \$ _____
- 3) How much funding will be provided by other sources?
(bank documents must be attached for each source listed below) \$ _____

Name: _____
Name: _____

Amount: \$ _____
Amount: \$ _____

The signatures below verify that the resources listed above are true, sufficient and available to support the total costs of a Cornerstone University education. I understand that any misrepresentation of this information may be cause for refusing admission or revoking enrollment.

Student Name (print)	Student Signature	Date
Parent/Guardian Name (print)	Parent/Guardian Signature	Date
Name of other funding source (print)	Other funding source Signature	E-mail Address



**Section D: Complete this section if you are requesting financial aid from Cornerstone University.
See estimated costs per year on page 1.**

**Section D-1: Family/guardian income and support:
(Attach official income statements)**

	Year 1	Year 2	Year3	Year 4
1. List annual family income:	\$ _____	\$ _____	\$ _____	\$ _____
2. Of this, what amount will help pay for your education costs?	\$ _____	\$ _____	\$ _____	\$ _____

**Section D-2: Savings, investments and assets:
(Attach official bank statements)**

	Year 1	Year 2	Year 3	Year 4
1. List additional resources available from family funds:	\$ _____	\$ _____	\$ _____	\$ _____
2. Of this, what amount will help pay for your education costs?	\$ _____	\$ _____	\$ _____	\$ _____

Section D-3: Non-parent or guardian sources of funding (if needed):

List all other financial sources that will be used for payment of your education.

(Photocopy this form if additional copies are needed.)

	Year 1	Year 2	Year 3	Year 4
Sponsor #1	\$ _____	\$ _____	\$ _____	\$ _____
Sponsor #2	\$ _____	\$ _____	\$ _____	\$ _____

Financial Sponsor #1 Verification

Affidavit of Sponsor

This section to be completed by the person(s) who is financially responsible for payment of the education costs.

Attach official documentation to verify these financial resources.

*I hereby attest that I am willing and able to provide no less than the amount stated in **Section D-3**, namely \$ _____ USD in cash for the duration of _____ years for the following named student _____.*
My relation to the student is _____

Financial Sponsor #2 Verification

Affidavit of Sponsor

This section to be completed by the person(s) who is financially responsible for payment of the education costs.

Attach official documentation to verify these financial resources.

*I hereby attest that I am willing and able to provide no less than the amount stated in **Section D-3**, namely \$ _____ USD in cash for the duration of _____ years for the following named student _____.*
My relation to the student is _____

Sponsor #1 Information and Verification

Sponsor Name and Title (print)

Sponsor Signature

Sponsor E-mail address

Date

Sponsor #2 Information and Verification

Sponsor Name and Title (print)

Sponsor Signature

Sponsor E-mail address

Date

**Section D-4: Summary of Financial Information:
Total Funds from Section D1-3**

	Year 1	Year 2	Year3	Year 4
Section D-1: Income	\$ _____	\$ _____	\$ _____	\$ _____
Section D-2: Savings, etc.	\$ _____	\$ _____	\$ _____	\$ _____
Section D-3: Sponsor (list total)	\$ _____	\$ _____	\$ _____	\$ _____
Total Pledged Amount:	\$ _____	\$ _____	\$ _____	\$ _____

Section D-5: Verification of Information

The signatures below verify that the resources listed above are true, complete, and available to support our contribution to the total costs of a Cornerstone University education. I understand that any misrepresentation of this information may be sufficient cause for refusing admission or revoking enrollment.

Student Name (print)

Student Signature

Date

**Priority Deadline to submit this form:
March 30, 2020**

**IMPORTANT:
Keep copies of this entire form for your records.**

Mail, fax or scan and e-mail all sections of this form and all necessary documentation to:

*Cornerstone University Admissions Office
1001 E. Beltline Ave NE
Grand Rapids, MI 49525
United States of America*

Fax: 616-222-1418
E-mail: dave.emerson@cornerstone.edu

