

International Student Declaration of Finance Estimated Cost of Attendance 2016-2017

Below is an estimated expense of attendance for one academic year (2 semesters) in regards to DSU Institutional expenses only. All costs are listed in US American Dollars (USD). All fees are subject to change without prior notice.

Estimated Expenses

Expense Source	Expenses
Tuition and Fees	\$8,918
Room and Board	\$6,750
Estimated Books and Supplies	\$1,200
Medical Insurance (required through DSU)	\$2,495
Total Expenses	\$19,363

This section is to be completed by the student. To be considered complete all blanks in sections A., B., C., D., and E. must be filled out even if the amount contributed is \$0. Section F. is the total of the amounts listed in sections A., B., C., D., and E. added together. All funds listed on this form must be accompanied by an official bank statement. DSU reserves the right to request verification of all bank statements. Failure to submit an official bank statement may result in a delay in the student's admission. A bank statement used for two or more students must show sufficient funds to cover expenses for all students and a separate copy of the bankstate must be submitted for each student.

Section	Funding Source	Sponsor Name	Amount
A.	Personal	Self:	\$
B.	Sponsor (Institution or Organization)	Sponsor: _____	\$
		Sponsor: _____	\$
C.	Government	Agency: _____	\$
D.	Relative or Friend	Relative: _____	\$
		Friend: _____	\$
E.	DSU Scholarships/Awards	Scholarship: _____	\$
		Award: _____	\$
F.	Total Expenses must be <i>equal or greater</i> than the total expenses listed in the Estimated Expenses.	Total	\$

By signing below I certify the total funds listed above in Section A., B., C., D., and E. are available for each academic year I will be attending Dickinson State University. I am aware the tuition and fees listed above are an estimate and are subject to change without notice.

Student Name: _____ Date: _____

Student Signature: _____ Date: _____

Parent, Guardian, or Sponsor Name: _____ Date: _____

Parent, Guardian, or Sponsor Signature: _____ Date: _____