

Submit your application and required documents to:
depaul@echigher.com
PART 1

Enter the following information as it appears on your passport.

Last Name
 Given (First) Name Middle Name
 Date of Birth Male Female
 Country of Birth
 Country of Citizenship

 Do you expect to come to the US: Alone With Spouse With Children (under 21 years of age)

Dependents (if applicable):

<input type="text"/>	<input type="text"/>	<input type="text" value="MM / DD / YYYY"/>	<input type="text"/>	<input type="text"/>
<i>Family (Last) Name</i>	<i>Given (First) Name</i>	<i>Date of Birth</i>	<i>Country of Birth</i>	<i>Relationship</i>
<input type="text"/>	<input type="text"/>	<input type="text" value="MM / DD / YYYY"/>	<input type="text"/>	<input type="text"/>
<i>Family (Last) Name</i>	<i>Given (First) Name</i>	<i>Date of Birth</i>	<i>Country of Birth</i>	<i>Relationship</i>

 I am currently outside the U.S. and wish to apply for the F-1 visa Yes No

 If you are currently in the US, what type of visa do you hold?

 Do you plan to: Apply for an F1 visa at US Embassy/Consulate Apply for a Change of Status within the US

If you are currently in the US on an F-1 visa, which school, college, university or institute issued your Form I-20?

Institution name
 Institution address

Address where your DePaul Form I-20 should be sent

Street
 City
 State/Province Postal Code
 Country
 Send to the above address until (date) Telephone
 Email

TUITION AND ESTIMATED LIVING EXPENSES 2018-2019 ACADEMIC YEAR

UNDERGRADUATE PROGRAMS TUITION	ESTIMATED	GRADUATE PROGRAMS TUITION	ESTIMATED	GRADUATE PROGRAMS TUITION	ESTIMATED	LIVING AND HEALTH EXPENSES
Driehaus College of Business	\$39,369	College of Communication	\$23,840	The Theatre School	\$35,820	
College of Communication	\$39,369	College of Liberal Arts and Social Sciences	\$22,400	The School for New Learning	\$20,480	
College of Liberal Arts and Social Sciences	\$39,369	College of Education	\$20,480	College of Law (JD)	\$47,716	
College of Computing and Digital Media (CDM)	\$39,369	College of Computing and Digital Media (CDM)	\$27,200	College of Law (LLM)	\$37,440	\$18,720 a year (12 months) for the College of Law
College of Education	\$39,369	College of Science and Health	\$23,040	College of Law (MJ)	\$26,880	
College of Science and Health	\$39,369	Kellstadt Graduate School of Business	\$33,920			DEPENDENT EXPENSES \$5,000 for the first dependent. \$4,000 for each additional dependent
School of Music	\$40,599	Kellstadt Graduate School of Business Full-time MBA	\$50,880			
The Theatre School	\$40,599	School of Music – Graduate programs	\$20,400			
The School for New Learning	\$22,680	School of Music – Certificate programs	\$15,300			

PART 2

DECLARATION OF FINANCIAL SUPPORT

SOURCE OF FUNDS	AMOUNT ASSURED 1ST YEAR	REQUIRED DOCUMENTATION
Student's personal funds:	US \$ <input type="text"/>	<input type="checkbox"/> Copy of bank statement
Family support:	US \$ <input type="text"/>	<input type="checkbox"/> Sponsor's certification and copy of bank statement Name and relationship of family member(s): <input type="text"/>
Other support:	US \$ <input type="text"/>	<input type="checkbox"/> Sponsor's certification and copy of bank statement Name and relationship of sponsor(s): <input type="text"/>
DePaul University support:	US \$ <input type="text"/>	<input type="checkbox"/> Copy of award letter Type of award: <input type="text"/>
Government/agency support:	US \$ <input type="text"/>	Copy of letter or document from government/agency Name of organization: <input type="text"/>
TOTAL SUPPORT	US \$ <input type="text"/>	<small>This amount should add up to the tuition and estimated living expenses on page 1 of the Affidavit.</small>

CERTIFICATION OF AGREEMENT BY STUDENT

I understand that as a non-immigrant student, I am expected to engage in full-time study at DePaul University. I certify that I have arranged for financial support for the duration of my studies at DePaul and have truthfully stated the financial arrangements above. I understand that by law I cannot expect to work to support my studies and that I cannot expect to receive financial aid after my arrival.

Student signature Date

CERTIFICATION OF AGREEMENT BY SPONSOR

I certify that I, , am able and willing to provide financial support to for the total amount of US \$ per year while she/he studies at DePaul University.

Sponsor's signature Date

Sponsor's address

Telephone COUNTRY CODE AREA CODE PHONE NUMBER

Fax COUNTRY CODE AREA CODE PHONE NUMBER