



Center For International Students & Programs

4800 Magnolia Avenue, Riverside CA 9206 • www.rcc.edu/international

Financial Certification Form

NAME OF STUDENT (Last) (First)

Every applicant must present evidence of financial resources (for example, a recent original bank statement) to cover the costs during the period of attendance at Riverside Community College District.

Costs for the academic school year are estimated as:

1. Tuition and Fees (two semesters/24 units).....\$7,833
Students are required to enroll in a minimum of 12 units per semester.
2. Insurance, books and supplies.....\$2,610
3. Living expenses (10 months).....\$10,000

ESTIMATED ANNUAL COST.....\$20,443*

Please show the amount of funds available to you **in each of the two years** you expect to attend this college by filling in the following appropriate blanks. Funds are to be reported in terms of U.S. Dollars.

*Additional dependent cost estimate: Spouse: \$3,500, Child: \$2,500

Source	1 st Year	2 nd Year
From Parents.....	\$ _____	\$ _____
From Own Savings.....	\$ _____	\$ _____
From Government.....	\$ _____	\$ _____
From Sponsor (Relative: _____; Other: _____).....	\$ _____	\$ _____
From Scholarship.....	\$ _____	\$ _____
From Other Source.....	\$ _____	\$ _____
Do you have finances to pay for your travel to and from the United States?	YES	NO

CERTIFICATION BY REPRESENTATIVE OR AGENCY

Our records indicate the information furnished by the applicant is an accurate statement of financial resources available to him/her for use during study in the United States. Attached is a bank statement indicating his/her ability to meet financial obligations.

Name (Print) _____
 Signature _____
 Title/Organization _____
 Address _____
 Telephone _____
 Date _____

CERTIFICATION BY PARENT OR OTHER FINANCIAL SPONSOR

I certify that I will be responsible for the financial support of the applicant as shown in the confidential statement above. My ability to meet this obligation is indicated by the attached original bank statement.

Name (Print) _____
 Signature _____
 Relationship _____
 Address _____
 Telephone _____
 E-Mail _____ Date _____