



818 Dunwoody Boulevard, Minneapolis, Minnesota 55403  
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A Certificate of Eligibility (Form I-20 or DSP-66) will not be authorized until this form is completed and returned to the International Services Division at Dunwoody College of Technology. Please indicate all money amounts in U.S. dollars.

**PLEASE PRINT IN INK**

Name (underline your family name) \_\_\_\_\_

Home Address \_\_\_\_\_

(Number and Street)

City \_\_\_\_\_ Country \_\_\_\_\_

1. Do you live with your parents? \_\_\_\_\_

If yes, answer questions 2 through 4. If no, proceed to question 5.

2. What is your family's total income per year? U.S. \$ \_\_\_\_\_

3. How many members of your family are dependent upon this income? \_\_\_\_\_

4. How many others are dependent on family funds for their education in the United States? \_\_\_\_\_

5. If you do not live with your parents, what is your source of income? \_\_\_\_\_

6. Your marital status:  Single  Married  Widowed  Divorced    Number of children: \_\_\_\_\_

7. List below the persons financially dependent on you:

Name	Age	Relationship	Will the person come to the U.S. with you or join you later?

8. How will you support those dependents who do not come with you to the United States? \_\_\_\_\_

9. If you plan to support them, from what source will you obtain the money? \_\_\_\_\_

10. In case of emergency, are there sources of additional funds available to you after you arrive in the United States?  Yes  No

If so, give the sources and amounts: \_\_\_\_\_

## Estimated Funds Needed and Sources of Funds

Estimated Funds Needed Each Year	
Tuition and Fees	\$ _____
Room and Board	\$ _____
Medical Insurance	\$ _____
Training Supplies	\$ _____
Miscellaneous	\$ _____
Transportation to or from the U.S.	\$ _____
<b>TOTAL</b>	\$ _____

Sources of Funds	Assured Amounts	
	1st Year	2nd Year
Personal Savings (Bank Official must certify below)	\$ _____	\$ _____
Family, Friends, or Sponsor (Also complete A below)	\$ _____	\$ _____
Your Government (Send signed copy of your award)	\$ _____	\$ _____
Other Sources	\$ _____	\$ _____
These totals should be equal to or more than estimated cost:	<b>TOTALS</b> \$ _____	\$ _____

I certify that the total amount of money, including travel funds, available to me for my first year of training at Dunwoody College of Technology is \$ \_\_\_\_\_ and for my second year is \$ \_\_\_\_\_ .

### A. Sponsor's Certification To be completed by sponsor

This is to certify that I have read the information furnished by the applicant on this form, that they are true and accurate statements, and that the funds will be provided as indicated above.

Sponsor's Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Sponsor's Address \_\_\_\_\_

Sponsor's Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Relationship of Sponsor to Applicant \_\_\_\_\_

### B. Bank Certification of Funds

This is to certify that I have read the information on this form, furnished by the applicant or sponsor, that they are true and accurate statements, and that funds are available.

Bank Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_

Name of Bank \_\_\_\_\_

Address of Bank \_\_\_\_\_

### C. Personal Certification

I hereby certify that I understand the financial responsibilities I am to assume if admitted to Dunwoody College of Technology and that the information I have given is complete and accurate to the best of my knowledge.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_