



## Financial Affidavit and Health Insurance Agreement Form (F-1 students only)

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Session start: \_\_\_\_\_

### DEPENDENTS

Do you have a spouse or children that will accompany you to the SF State?      Yes      No

Applicants who wish to have their spouse or children (under 21 years old) accompany them to SF State must provide additional funds of \$5000 for each dependent. Attach a copy of passport and marriage certificate (for spouse), and/or birth certificate (for each child).

Family/Last Name	First/Given Name	Date of Birth	Relationship to applicant

### SOURCE OF FINANCIAL SUPPORT (choose all that apply)

Indicate amount of funds (in USD) available next to the appropriate source

- USD \$ \_\_\_\_\_ **Student's personal funds.** Attach your financial document(s)
- + USD \$ \_\_\_\_\_ **Funds from sponsor(s).** Attach your sponsor's financial document and sponsor must complete Sponsor Agreement section below.
- + USD \$ \_\_\_\_\_ **Government or Private scholarship, grant, loans.** Attach financial guarantee or award letter with details (amount, length, name of awarding body) related to it.
- = USD \$ \_\_\_\_\_ **Total** (amount must be equal or greater than total amount for your program on page 2).

### SPONSOR AGREEMENT

**I guarantee that the minimum financial amount needed for the duration of study at the ALI is available for the student on this form.**

Sponsor's Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Sponsor's Signature: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_

### STUDENT FINANCIAL AND HEALTH INSURANCE AGREEMENT

I guarantee the minimum financial amount needed for one year of study at the ALI is available for me. I understand that I am required to buy ALI health insurance before classes begin. If I do not pay for the required health insurance, I will not be able to participate in the program. This may violate my immigration status requirement and could lead to termination.

Student's Signature: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_

## EAP Financial and Health Insurance Requirements

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### Proof of Financial Ability for F-1 visa students

All SF State F-1 visa students are required to provide financial documents to demonstrate their ability to pay all tuition, fees, and living expenses for the duration of their program at the American Language Institute (ALI). The ALI does not have financial aid for students, and students are not allowed to work. Financial support can be any combination of personal or sponsored funding. The current required amount for 2 semesters is:

Program	Tuition*	Yr 2022 Living Expenses**	Amount of funding required
English for Academic Preparation (EAP)	\$11,990	\$24,557	<b>\$36,547</b>

\* Tuition amount for 2 semesters (spring, fall). Subject to change without notice, please visit CEL website (<https://ali.sfsu.edu/sessions>) for current information

\*\* Estimated cost of living expenses in the Bay Area for 9 months. Actual expenses may vary. Living expenses include Food & Housing, Books & Supplies, Transportation, Personal Expenses, and San Francisco State University (SF State) approved Health Insurance.

**Single Semester:** Students planning to study for one semester can submit proof of financial funds required for the duration of a specific term. I-20 program length will be for one term only. The amount of funding required is as follow:

Program	Amount of financial support
EAP 5-weeks (summer)	<b>\$8,241</b>
EAP 8/10-weeks	<b>\$12,314</b>
EAP 16/17-weeks (fall/spring)	<b>\$19,660</b>

An application fee of \$100 is due at the time of application. This is a one-time non-refundable, non-transferable fee. An form I-20 will be issued to the student upon admission to the program and verification of financial documents.

### Financial Documents

Evidence of Financial resources may come from a variety of sources such as: personal, sponsor (parents, family funds), scholarships, fellowships, sponsoring agencies, loans, or grants.

Acceptable documents:

- Bank letters
- Bank statements (savings or checking accounts)
- Fixed term/Time Deposits (Liquid assets)
- Scholarship/Grant/Loan (government, private, or school)

Financial documents must:

- Be in English (or original language and a certified English translation)
- Be on official bank letterhead stationery, with bank stamp or bank officer's signature
- Include an issue date not more than 6 months prior to the start term
- Show an amount equal or higher to the amount of funding required for your program.
- Include the account holder's name/beneficiary name in English (if account not in student's name, then name on financial document must match name of sponsor in the Sponsor section of the Financial Affidavit)

Financial affidavit and financial documents should be submitted with application or as a PDF attachment

### Health Insurance

F-1 students are required to purchase and maintain during the entirety of their program the SF State sponsored health insurance plan offered by **Relation** - purchasing instructions will be included in your admission letter. Other health insurance plans will not be accepted. There are two exceptions to this:

1. Students on a government-sponsored scholarship which provides compatible insurance coverage as a part of the sponsorship.
2. Students receiving insurance coverage through an employer-sponsored plan in the United States (i.e. receipt of insurance is a part of the U.S. employment compensation through your spouse).

Price of health insurance changes each year. Approximate cost for Academic Year 2021-2022: \$189 per month.