

STATEMENT OF FINANCIAL SPONSORSHIP (SFS) FORM

Valid for Academic Year: Fall 2024 – Spring 2025

All items below must be submitted to OISS:

- ✓ Passport
- ✓ SFS Form
- ✓ Financial Documents

Office of International Students Scholars (OISS)
Email: i20@hpu.edu

DEGREE SEEKING STUDENTS

Requesting an I-20 from Hawai'i Pacific University

Part I: PERSONAL INFORMATION	
Full Name (As it appears on your passport):	
Last/Family Name:	First Name: Middle Name:
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Date of Birth: (Month/Day/Year):
Country of Citizenship:	Country of Birth: City of Birth:
Email:	Contact Phone #:
Are you currently in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", what visa classification do you hold?
If you are currently attending a school in the U.S., list the name of the school: If you need to transfer your SEVIS record, please complete Transfer In Form that can be found at: http://www.hpu.edu/oiss/forms/index.html	
PERMANENT (NON U.S.) ADDRESS: <i>(Address of your residence in your home country)</i>	
Address Line 1:	Country:
Address Line 2:	Semester applied for: <input type="checkbox"/> Fall <input type="checkbox"/> Spring
City and Postal Code:	Applying as: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate

Part: II: SOURCE OF FINANCIAL SUPPORT

All students must be able to demonstrate **financial ability to pay for their academic and living expenses** before Hawai'i Pacific University can issue an immigration document. In addition, students must ensure that they have the funds available to **cover all expenses for the duration of their program of study.**

Expense Breakdown	MSN IN FNP/ AGACN	MA SUST	MADMS	MSMS	MED SEC ED/ELEM ED MSCJ/ MPA	MATESOL/ MA STR COMM
Current Tuition and Fees	\$26,100	\$22,230	\$18,900	\$28,890	\$17,010	\$14,220
Room and Board	\$16,042	\$16,042	\$16,042	\$16,042	\$16,042	\$16,042
Other Expenses: Books, Supplies, Miscellaneous	\$4,700	\$4,700	\$4,700	\$4,700	\$4,700	\$4,700
TOTAL EXPENSES TO BE DOCUMENTED	\$46,842	\$42,972	\$39,642	\$49,632	\$37,752	\$34,962

- 1) The amounts indicated above are **estimates for one academic year**. All fees are estimated cost for immigration purposes only.
- 2) Exact tuition and additional fees may vary. For the most up-to-date figures and program-specific fees, visit: <https://www.hpu.edu/business-office/fee-schedule.html>
- 3) If you are awarded an HPU scholarship, the award amount will be applied to your tuition.

****This is a two-page form. Be sure to complete both pages.**

DEPENDENT INFORMATION:

If you will be accompanied by your spouse and/or children on an F-2 of admission, you are required to demonstrate your financial ability to support them. The additional cost of supporting a **spouse is USD \$8,000 per year** and the additional cost for each **child (under 21 years old) is USD \$5,000**. Please provide the information below regarding your dependents:

Dependent's Full Name as it appears in the Passport (LAST, First, Middle)	Date of Birth: (MM/DD/YYYY)	Country of Birth	Country of Citizenship	Relationship: (husband/wife/son/daughter)

REQUIRED DOCUMENTATION:

For each source of funding, you **must attach financial documents** in English and indicate the amount in U.S. dollars on bank letterhead, with a bank official's signature, bank stamp or seal. Documents must at least date nine months prior to the semester start date.

SOURCES OF FUNDS: Complete all that apply and total all funding.	
A. PERSONAL SAVINGS (Funds from self and private loans):	\$
B. FAMILY/RELATIVE/INDIVIDUAL SPONSOR (Funds from family, extended family members, or other individuals who are not legally present in the U.S.) <i>*Please print and sign (electronic signatures will not be accepted for this section)</i> Name of Sponsor: _____ Relationship to Student: _____ *Individual Sponsor's Signature: _____ Date: _____	\$
C. GOVERNMENT/EMPLOYER/OTHER ORGANIZATION (Attach a signed copy of official sponsorship letter.) Name: _____ Type: <input type="checkbox"/> U.S. Government <input type="checkbox"/> Company <input type="checkbox"/> International Organization <input type="checkbox"/> Home Government <input type="checkbox"/> Employer	\$
D. HAWAI'I PACIFIC UNIVERSITY (Funds from Scholarship, Merit Award, or other. Attach a signed copy of award letter)	\$
E. TOTAL (Must be equal to or greater than the estimated expenses for one year in your program of study and those related to supporting dependents if any.) <i>Total must match financial documentation.</i>	\$

*I certify that the above information and the attached supporting documents are true and complete to the best of my knowledge. I understand that I am responsible for all the expenses related to my program of study at Hawai'i Pacific University. ***Please print and sign (electronic signatures will not be accepted for this section)***

****Please be aware that HPU OISS will not accept this form if it is not accurately filled out in its entirety.***

Student's Signature: _____ Date: _____