

# Valid for Academic Year: Fall 2022 – Spring 2023



## STATEMENT OF FINANCIAL SPONSORSHIP (SFS) FORM

Valid for Academic Year: **Fall 2022 – Spring 2023**

All items below must be submitted to OISS:

- ✓ Passport
  - ✓ SFS Form
  - ✓ Financial Documents
- Office of International Students Scholars (OISS)  
**Email:** i20@hpu.edu

### VISITING 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: <a href="http://www.hpu.edu/oiss/forms/index.html">http://www.hpu.edu/oiss/forms/index.html</a>	
PERMANENT (NON U.S.) ADDRESS: (Address of your residence in your home country)	* ADDRESS YOU WOULD LIKE YOUR I-20 SENT TO: (If you are currently in the U.S., you must pick up your I-20 at HPU OISS)
Address Line 1:	Addressee:
Address Line 2:	Required Contact Phone #: <b>(Must be a Non-U.S. #)</b>
City:	Address Line 1:
Country:	Address Line 2:
Postal Code:	City:
Semester applied for: <input type="checkbox"/> Fall <input type="checkbox"/> Spring	Country:
Applying as: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	Postal Code:

**\*Please be aware that your I-20 will only be sent to this address.**

**\*I-20 can only be sent directly to the student (no agents, program coordinators, etc.)**

### **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	Undergraduate One-Semester	Undergraduate Two-Semester	Graduate One-Semester *2	Graduate Two-Semester *2
Current Tuition and Fees	\$16,250	\$32,500	\$11,510	\$23,020
Room and Board	\$7,639	\$15,278	\$7,639	\$15,278
Other Expenses: Books, Supplies, Miscellaneous	\$2,350	\$4,700	\$2,350	\$4,700
<b>TOTAL EXPENSES THAT MUST BE DOCUMENTED</b>	<b>\$26,239</b>	<b>\$52,478</b>	<b>\$21,499</b>	<b>\$42,998</b>

- 1) The amounts indicated above are **estimates**. **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>

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

**REQUIRED DOCUMENTATION:**

For each source of funding, you **must attach financial documents in English** and **indicate the amount in U.S. dollars on official 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.

<b>SOURCES OF FUNDS: Complete all that apply and total all funding.</b>	
<b>A. PERSONAL SAVINGS</b> (Funds from self and private loans):	\$
<b>B. FAMILY/RELATIVE/INDIVIDUAL SPONSOR</b> (Funds from family, extended family members, or other individuals. <b><u>*Please print and sign (electronic signatures will not be accepted for this section)</u></b>  Name of Sponsor: _____ Relationship to Student: _____  <b>*Individual Sponsor’s Signature:</b> _____ <b>Date:</b> _____	\$
<b>C. GOVERNMENT/EMPLOYER/OTHER ORGANIZATION</b> (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	\$
<b>D. HAWAI’I PACIFIC UNIVERSITY</b> (Funds from Scholarship, Merit Award, or other. Attach a signed copy of award letter)	\$
<b>E. TOTAL</b> (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.) <b><u>Total must match financial documentation.</u></b>	\$

***CALCULATION GUIDE: A + B + C + D = E***

*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: \_\_\_\_\_