



CERTIFICATE OF FINANCIAL RESPONSIBILITY

This statement must be completed and uploaded to the iRocket portal with supporting documents to comply with U.S. Citizenship and Immigration Services (USCIS) regulations and allow us to issue the I-20. Make copies of this form for your records and for use at the United States Consulate.

Student Information

Family Name

First/Given

Middle

Date of Birth ____ / ____ / ____ (month/day/year)

I certify the information below is an accurate statement of my financial resources available for my studies at The University of Toledo.

Student Signature _____ Date _____

Estimated Expenses

The University of Toledo requires proof of financial support for the first two semesters of study. These are estimates and subject to change. These estimates **DO NOT** include travel expenses, books, recreation and incidental expenses.

Expenses	Graduate Business Students	Graduate Education Students	All Other Graduate Students
Tuition and fees	\$21,632	\$20,164	\$21,632
Shared living expenses	\$9,750	\$9,750	\$9,750
Required health insurance	\$2,295	\$2,295	\$2,295
TOTAL	\$33,677	\$32,209	\$33,677

If you have dependents, add \$5,000 for the first dependent and \$4,000 for each additional dependent to the TOTAL.

Sources of Financial Support (Check all that apply.)	Amount from each source
Self (Upload a bank statement showing funds.*)	
Parent or Individual Sponsor: Name of Sponsor _____ (Sponsors must sign below. Upload a bank statement from your sponsor.*)	
Government or Sponsoring Agency (Upload award letter with amount and dates.)	
UToledo Scholarship/Assistantship (Upload official award letter signed by the department/college.)	
Total in U.S. dollars (This amount should equal the TOTAL from the Estimated Expenses table.)	

*All bank statements must be in English, issued within the last 30 days, and liquid, readily available funds.

Affirmation of Sponsor

I hereby affirm that the contents of the above statements are true and correct, and I have agreed to provide adequate financial support to the student for the duration of their program of study.

Signature of Sponsor _____ Date _____

Relationship to Student _____