

UNIVERSITY OF HAWAII AT HILO - Supplementary Information Form for International Students

Admissions Office • 200 West Kawili St. • Hilo, HI 96720-4091 USA Tel: (808) 932-7446, Fax: (808) 932-7459 • e-mail: uhhadm@hawaii.edu • Web: www.hilo.hawaii.edu

CONFIDENTIAL FINANCIAL STATEMENT FORM FOR INTERNATIONAL APPLICANTS (SECTION C only)

INSTRUCTIONS: Attach official bank statement(s) if your bank will not complete the BANK VERIFICATION section. If sponsored by a government or private organization, a signed award letter is required. **Bank statements may not be more than 90 days old.** Mail-in completed form and documentation to the address above, or submit by fax or e-mail attachment.

Type or print clearly. Where not applicable, write "N/A"

Use names as listed on passport:

Family/ Last Name _____ First Name _____ Middle Name _____

SECTION A - EDUCATIONAL INFORMATION

1. List schools attended, and include the one you are now attending.

Name of Institution (do not use initials)	Location	From Month/Yr.	To Month/Yr.	Name of Diploma/Certificate	Date Received Month/Yr.
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Primary schools (no transcripts required):

Secondary or middle schools (no transcripts required):

2. What is your native language? _____ 3. What is the language spoken in your home? _____

4. How many years have you studied in a school where English is the language of instruction? _____

In secondary or middle school from (month) _____ / (year) _____

In university or college from (month) _____ / (year) _____ MM/DD/YY

5. If you have taken/ will take the Test of English as a Foreign Language (TOEFL) specify test date: _____

6. Why did you select the University of Hawaii at Hilo? _____

7. Provide additional information that may be helpful in evaluating your application, such as employment, talents, skills, fellowships or scholarships.

SECTION B - APPLICANT'S CERTIFICATION

I certify that the information I have given on this form is complete and correct to the best of my knowledge and that I have not attended any educational institutions other than those listed. I understand that application materials will become the property of the University of Hawaii at Hilo and will not be returned to me nor be available for distribution.

Printed Name: _____

Signature (By entering your last name on this line, you agree that it is the same as your signature): _____ Date: (MM/DD/YY) _____

SECTION C - CONFIDENTIAL FINANCIAL INFORMATION

Applicants requiring an I-20 or DS-2019 for the F-1 or J-1 (student) visa/status must complete this section. Non-immigrant student visa holders are required to document sufficient funds to provide for their academic studies in the United States.

I. Family/Last Name _____ First Name _____ Middle Name _____

Permanent address in home country: _____ Date of Birth: _____
 e-mail address: _____

Do you plan to enter the U.S. from abroad? No Yes Do you currently hold a U.S. visa? No Yes If yes, type of visa: _____

Name of school that issued your last I-20 or DS-2019: _____

If in the U.S. give your SEVIS I.D. number: _____

If you plan to bring dependents, list their names and required information in the spaces below. Provide evidence that approximately \$4,000 per year/per dependent is available above the amount required for yourself:

Name	Birth Date	Country of Birth	Country of Citizenship	Relationship	Gender

II. Name of sponsor: _____ Phone: _____

Address: _____

Relationship to student: _____ Yearly amount of support in U.S. \$: _____

By signing this affidavit of support, I (or my organization) agree to be financially responsible for the student indicated above by way of tuition, fees, living and any other relevant expenses for the duration of this student's enrollment at the University of Hawai'i at Hilo (or for ___ years).

Signature of Sponsor _____ Date _____

(check one)

III. BANK VERIFICATION This is to certify that the sponsor applicant listed above is financially capable of the monetary support indicated above and if the funds are outside the U.S.A., there are no government restrictions regarding the release of the funds. This certification is offered with no responsibility on the part of this bank or financial agency.

Name of Account Holder _____ Type of Account _____ Date Opened (MM/YY) _____

Name & Address of Bank _____

Name of Bank Official _____ Title _____

Signature of Bank Official _____ Date _____ Bank Seal or Stamp