



Certification of Finances Form for International Students

Loyola University Maryland utilizes a need-aware review process which means that international applicants are considered for admission and financial assistance based on their academic background, financial need, and availability of student aid resources. This process allows students to document their intended sources of funding for their education so that Loyola can assess whether the applicant would need additional financial aid beyond any merit scholarship they may qualify for, and if so, whether Loyola is able to offer need-based financial aid. For additional information, please review the Financial Aid webpage for International Students.

Please complete the form below and submit the completed document by uploading it to your Applicant Status Portal. To view the most updated estimated cost of attendance, please visit loyola.edu/international-costs.

FAMILY NAME _____ FIRST (GIVEN) NAME _____

EMAIL ADDRESS USED ON YOUR APPLICATION TO LOYOLA _____ DATE OF BIRTH: MONTH/DAY/YEAR --

Expected Visa Type: F-1 Student Visa Other(specify) _____

Personal or Family Savings

If any of your funding will be in this category, a corresponding Bank Letter or Statement Application Checklist item must be provided.

\$.00 \$.00 \$.00 \$.00 \$.00
YEAR 1 YEAR 2 YEAR 3 YEAR 4 TOTAL

NAME OF BANK _____ NAME OF ACCOUNT HOLDER _____

RELATIONSHIP OF ACCOUNT HOLDER TO STUDENT _____

I CERTIFY THAT THE INFORMATION PROVIDED ON THIS FORM IS ACCURATE AND I INTEND TO USE THE FUNDS LISTED TOWARDS THE STUDENT'S EDUCATIONAL EXPENSES.

SIGNATURE OF ACCOUNT HOLDER _____ DATE _____

Sponsor Savings *(liquid funds available from a sponsor other than a family member)*

If any of your funding will be in this category, a corresponding Bank Letter or Statement Application Checklist item must be provided.

\$.00 \$.00 \$.00 \$.00 \$.00
YEAR 1 YEAR 2 YEAR 3 YEAR 4 TOTAL

NAME OF BANK _____ NAME OF ACCOUNT HOLDER _____

RELATIONSHIP OF ACCOUNT HOLDER TO STUDENT _____

I CERTIFY THAT THE INFORMATION PROVIDED ON THIS FORM IS ACCURATE AND I INTEND TO USE THE FUNDS LISTED TOWARDS THE STUDENT'S EDUCATIONAL EXPENSES.

SIGNATURE OF ACCOUNT HOLDER _____ DATE _____

Add the annual and total columns above

\$.00 \$.00 \$.00 \$.00 \$.00
YEAR 1 YEAR 2 YEAR 3 YEAR 4 TOTAL



Additional Questions

Do you have a source for emergency funds during your studies? Yes No

If yes, list source and amount available _____

How will you pay for your transportation to the U.S.? (students who are already in the U.S. may skip this question)

What is the total amount of money you expect to have when you arrive at Loyola? _____

Do you plan to stay in the U.S. during the summer when courses are not in session? Yes No

If Yes, what are the sources and amounts of funding available to you during the summers? _____

I CERTIFY THAT THE INFORMATION ON THIS FORM IS TRUE, CORRECT, AND COMPLETE.

STUDENT SIGNATURE

DATE