



Global Student Services
 Email: lcc-international@lcc.edu
 Phone: 517-483-1910
 Fax: 517-483-9645

Affidavit of Financial Resources

To comply with USDHS regulations, Lansing Community College is required to verify the availability of funding for tuition, fees, and living expenses for your period of study before issuing a Form I-20 for study in F-1 or M-1 nonimmigrant status.

In addition to submitting this form, **please submit evidence of liquid funding from all sources** (may include bank statements, financial awards, evidence of loans, etc.- titles and deeds not accepted).

Financial documentation must be **in English** or include an official English translation.

All financial documentation must be dated within 6 months of the program start date.

THIS SECTION TO BE COMPLETED BY THE STUDENT

Year 1 Estimated Costs		
Tuition and fees 1	\$13,125.00	1 - Based on full-time enrollment of 12 credit hours per semester during the academic year and 6 credit hours during the summer session. Tuition and fees are based on \$420 per billing hour. Tuition and fees are subject to change at any time upon action of the Board of Trustees.
Room and board 2	\$15,445.00	2 - This cost estimate is based on a 12-month lease in modest accommodations in the surrounding college community, with the student preparing most meals at home.
Books and supplies 3	\$675.00	3 - Based on purchase or rental of a combination of new or used textbooks and Open Educational Resources (OER) for an average academic program. Certain specialties may have higher costs.
Health insurance 4	\$600.00	4 - Health insurance is strongly encouraged. Students may purchase insurance in their own countries or they may purchase student insurance from companies in the United States.
Transportation 5	\$312.00	5 - Based on public transportation (not including Rideshare). Does not include purchase price of private auto or transportation to and from the United States.
Miscellaneous 6	\$2,000.00	6 - Included are daily living essentials, personal hygiene items, and social, cultural and leisure events.
Total Estimate	\$32,157.00	

THIS SECTION TO BE COMPLETED BY THE STUDENT AND THEIR SPONSOR(S)

Students are required to have a plan for funding the entire program of study at LCC which may be a total of 2 years. Please fill in the chart below to show the amount of funding guaranteed by your sponsor source(s) for Year 1 of study. The total should be equivalent to at least \$32,157.00 USD.

Funding Source	Amount (USD)
Personal Funds (students' personal bank account)	
Family or Friends Outside the US	
US Sponsor	
Business or Government Sponsor	
Total (should be equivalent to at least \$32,157.00 USD)	

SPONSOR INFORMATION

Family Name:			
Given Name:			
Relationship to student:	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Sister
	<input type="checkbox"/> Brother	<input type="checkbox"/> Aunt	<input type="checkbox"/> Uncle
	<input type="checkbox"/> Friend	<input type="checkbox"/> Other: _____	

Sponsor acknowledgement: I understand that by completing and signing this form, I am agreeing to provide funds to this student in the amount indicated above. I understand that I am also agreeing to provide funds to this student for Year 2 of study in the amount indicated above. I understand that LCC does not have emergency funds for students whose sponsors fail to provide promised funds.

Signature of sponsor: _____

Date: _____

Student Acknowledgment

I understand that I am ultimately financially responsible for my tuition, fees, books, and other expenses incurred while studying at LCC. I understand that it is my responsibility to secure enough funding to cover my expenses while studying in the United States. I understand that there are limits to employment while studying in nonimmigrant status and I will not be able to pay for my education by working in the United States. I understand that LCC does not have emergency funds for students whose sponsors fail to provide promised funds.

My signature below acknowledges that information provided on this form is accurate.

Printed Name: _____

LCC ID #: X00

Signature of student: _____

Date: _____

LCC provides equal opportunity for all persons and prohibits discriminatory practices based on race, color, sex, age, religion, national origin, creed, ancestry, height, weight, sexual orientation, gender identity, gender expression, disability, familial status, marital status, military status, veteran's status, or other status as protected by law, or genetic information that is unrelated to the person's ability to perform the duties of a particular job or position or participate in educational programs, courses, services or activities offered by the College.

The following individuals have been designated to handle inquiries regarding the nondiscrimination policies: Equal Opportunity Officer, Washington Court Place, 309 N. Washington Square Lansing, MI 48933, 517-483-1730; Employee Coordinator 504/ADA, Administration Building, 610 N. Capitol Ave. Lansing, MI 48933, 517-483-1875; Student Coordinator 504/ADA, Gannon Building, 411 N. Grand Ave. Lansing, MI 48933, 517-483-1885; Human Resource Manager/Employee Title IX Coordinator, Administration Building, 610 N. Capitol Ave. Lansing, MI 48933, 517-483-1879; Student Title IX Coordinator, Gannon Building, 411 N. Grand Ave. Lansing, MI 48933, 517-483-9632."