



## Certificate of Finances

The purpose of this Certificate of Finances is to help Fairfield University obtain complete and accurate information about the funds available to foreign applicants who want to study in the United States and will be seeking a student visa sponsored by Fairfield University. This form must be completed by applicants who do not have US citizenship for their application to be considered complete and ready for review. This form does not require official bank statements or notary signatures and does not replace the official Affidavit of Support which will be required after admission for students looking to confirm with Fairfield University.

This form can be uploaded to your application portal or emailed to Associate Director of Admission Tim O'Connor at [toconnor@fairfield.edu](mailto:toconnor@fairfield.edu)

Name (Exactly as it appears on student's passport)

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Family (Surname) \_\_\_\_\_ First Name (Given name) \_\_\_\_\_

What Fairfield major will you plan to study \_\_\_\_\_

Estimate of student expenses for the academic year 2023-2024

Undergraduate Students	
Tuition and Fees	\$56,140
Health Insurance	\$2,646
All Combined Tuition and Fees	\$58,786
Room and Board (9 months)	\$17,420
Books, Supplies and Personal Expenses	\$2,500
<b>TOTAL</b>	<b>\$78,706</b>

Please provide sources of Financial support (lines may left blank or indicate "\$0" if appropriate.)

- Personal / Family Funds \$ \_\_\_\_\_

- Government Funds (If applicable) \$ \_\_\_\_\_

- Athletic Funds \$ \_\_\_\_\_

- Other \$ \_\_\_\_\_

This certificate must be completed by the **parents/legal guardian or sponsors** of the student named above.

I \_\_\_\_\_ Certify that I am able, willing and do promise to

provide \_\_\_\_\_ no less than U.S. \$ \_\_\_\_\_ per year to meet his/her expenses during each year of study at Fairfield University

Relation to the student \_\_\_\_\_

I promise that the information I have provided above is true and correct. I understand that I will have a financial responsibility to support the student named above during the length of the student's program at Fairfield University.

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Sponsor / Parent / Guardian - Signature

MONTH / DAY / YEAR

- Undergraduate Admission – Kelley Center
- Fairfield University
- 1073 North Benson Road
- Fairfield, CT 06824-5195 (203) 254-4100
- Fax: (203) 254-4199
- E-mail: [admis@fairfield.edu](mailto:admis@fairfield.edu)