



# International Student Admissions Sponsor Financial Responsibility Form

Normandale Community College requires proof of financial support for one academic year (9 months), per federal regulations for F-1 international students. This form must be filled out completely, notarized, and attached to the International Student Documentation Form.

### Estimated Cost of Attendance for 2025-2026

|  |                 |
|--|-----------------|
| <b>Tuition and Fees</b>  | \$6,906         |
| <b>Mandatory Medical Insurance</b>   | \$2,289         |
| <i>Medical Insurance must be paid prior to course registration. Medical insurance can be waived with proof of insurance through an exchange program or government agency. Dollar amount is subject to increase every year.</i> |                 |
| <b>Living Expense</b>  | \$18,305        |
| <i>Rent, Transportation, personal (local estimate)</i>   |                 |
| <b>TOTAL</b>   | <b>\$27,500</b> |

\*Students with dependents must add \$4,000 for a spouse and/or \$3,000 per child.

### TO BE COMPLETED BY THE SPONSOR

My name is: \_\_\_\_\_ . I am serving as the financial sponsor for \_\_\_\_\_, who is my \_\_\_\_\_. I hereby guarantee to maintain support for this student's educational costs and living expenses while this student is enrolled at Normandale Community College. I have provided a current account statement from within the last 90 days that is certified by my bank attesting to my ability to support this student.

I hereby declare my plan to provide \_\_\_\_\_ annually for this student's educational and living expenses through program completion.

### Financial Sponsor Contact Information

Street Address: \_\_\_\_\_ Apt Number: \_\_\_\_\_  
City: \_\_\_\_\_ State/Province/Territory: \_\_\_\_\_  
Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_

I certify that the above information is accurate and complete. I understand that any information withheld or given falsely will result in ineligibility for an I-20 at Normandale Community College.

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

### Notary Public

Printed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Notary Stamp

Do not submit form without a notary. Sponsor's signature must be notarized.