

Financial Affidavit Academic Year 2024-25

All applicants must submit a completed Financial Affidavit and supporting proof of financial support before Iowa Western Community College (IWCC) can issue a Form I-20, Certificate of Eligibility. **All documents provided in support of the financial affidavit become the property of IWCC and will not be copied, shared, or returned. Keep a copy for your Visa appointment!**

Estimated Academic Year Expenses*

Tuition & Fees**	\$6,930
Room & Board***	\$8,750
Books & Supplies	\$600
Housing Deposit	\$200
First Time Enrollment Fee	\$35

Total Expenses \$16,515 USD

Incidentals: There may be other expenses related to living and studying in the U.S. These should be included in your budget. Incidental expenses may include: transportation, healthcare, clothing, grocery, tools, and uniforms.

Instructions

- All documents must be dated within six months (180 days) from the day of submission.
- An International Student may have more than one financial sponsor.
- An international student in the U.S. on a Form I-20 may not serve as a sponsor for another student.
- Potential U.S. employment of the student may not be used as proof of funds.
- IWCC reserves the right to request original documents.
- IWCC reserves the right to require additional financial documentation from applicants.
- Photocopies and electronic scans of documents are acceptable if clear and in likeness [color] to original.

Accepted Documents:

- Bank Letter
 - Should be written on letterhead
 - Must contain the following:
 - Date
 - Sponsor's full name
 - Full name of the financial institution
 - Name and signature of bank official
 - Statement of currency represented
 - Confirmation that finances are readily available for use (instant access)
 - Summary of total balance of account(s), OR
 - o Business Accounts: Requires copy of identification and lawful proof of access by individual
- Scholarship guarantee
- Letter of Intent issued by Iowa Western

A literal English translation should accompany all documents.

^{*}All figures are estimates and subject to change without notice.

^{**}Based on 15 credit hours per semester for the academic year (Aug - May).

^{***}Housing charges vary based on which dorm is assigned, or if a student lives off-campus.



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Section 1: Student Information						
 Last/Surname	Name	<i>F</i>	irst/Given Name	Middle Initial		
	nt's Name)			s form is complete and accur		
Student's Signature (R	EQUIRED)		Month/Day/Year			
Section 2. Statem	ent of Financial S	upport				
Please write total o	amounts from eac	h financial source	below.			
Student's <i>Personal Ba</i>	<i>nk Account</i> Funds			\$	USD	
	Others			\$	USD	
Funds from <i>Other Source</i> (scholarships, government agency, private foundation or other agency)				USD		
Funds <i>from IWCC scho</i>	olarship			\$	USD	
			less than \$8,750 for the acc	\$sademic year.	USD	
Section 3. Verifica						
the purpose of full	-time study at low ing the availability	a Western Comm	unity College, and that	s indicated above to the I (we) are submitting ba I financial support in cov	ank	
Sponsor #1 Signature			Month/Day/Year	Relationship to Student		
Address	City, Country	Postal Code	Telephone Number			
Sponsor #2 Signature			Month/Day/Year	Relationship to Student	;	
 Address	City. Country	Postal Code	 Telephone Number			



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The dependents of an F-1 student may accompany the student to the United States under F-2 status. To qualify for an F-2 Form I-20, Certificate of Eligibility, a **spouse** or unmarried **minor** (under age 21) must provide the following documentation:

Spouse:

- Valid marriage certificate
- Copy of Passport(s)
- Personal Email
- U.S. Phone Number (if relevant)
- Additional funds to cover dependent expenses

Minor:

- Copy of valid birth certificate
- Copy of Passport(s)
- Additional funds to cover dependent expenses

Dependent Expenses*

The following amounts should be added to the total estimated expenses when a **spouse** and/or **children** are accompanying the student to the United States.

Spouse \$7,000 USD Per Dependent Child \$5,000 USD

List names of dependents.

	Last/Surname Name	First/Given Name	Date of Birth	Relationship
1.				
2.				
3.				

Return this form with required documentation to:

Iowa Western Community College

International Student Services

2700 College Road Council Bluffs, IA 51503 Fax: +1 712.388.6803

international@iwcc.edu

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