



LOMA LINDA UNIVERSITY
INTERNATIONAL STUDENT AND SCHOLAR SERVICES

FINANCIAL RESPONSIBILITY ACKNOWLEDGMENT FORM

I(First, Middle, Last name) _____, **Born on**(mm/dd/yr) _____,

hereby acknowledge that I understand that the finances that I am showing are for an estimation made by the office of the International Student & Scholar Services, as a minimum, both for living expenses and tuition for one full academic year (includes 4 quarters). Furthermore, I acknowledge that I am responsible both for tuition and living expenses for myself and any accompanying dependants for the duration of my program.

I understand that if my program takes longer than the estimated completion date noted on my I-20 and if I am eligible for an extension of this date (which will be determined by the office of the International Student & Scholar Services according to regulations), I will be responsible for showing original financial documents for the remainder of the program, for both tuition and living expenses for myself and my accompanying dependants.

Signature _____ **Date:** _____