

# New Mexico Junior College Certificate of Financial Responsibility

NAME (as it appears on your passport):

Last or Surname	First or Given	Middle Name	Suffix
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This is to certify that I, the undersigned, have agreed to provide the funds indicated below to the student for the purpose of full-time study at New Mexico Junior College. I am submitting the required verification indicating the availability of these funds. I am also aware that tuition, fees, and cost of living expenses may increase each year.

I further attest to the following:

- I have received assurance from the student that he/she will be adequately insured against accident or illness, emergency medical, and repatriation expenses while in the United States.
- Should the student face a financial crisis or unforeseen hardship while at New Mexico Junior College, I will be responsible for aiding the student through the difficulty. I understand that should the student appeal to the College, the appeal will be referred to me for assistance.
- I have attached certified bank or other financial documentation to this form verifying the availability of the funds indicated above.

**The applicant must document support (in U.S. dollars) equal to or greater than the amounts indicated below. These figures are the estimated costs per academic year (9 months) and are subject to increase without notice:**

Full amount: **\$15,000** (per academic year – 9 months)

**(2 semesters)**

Tuition and Fees.....	\$ 3,248
Living Expenses.....	\$ 11,752

**TOTAL ..... \$15,000**

Please bear in mind that students holding F-1 visas are authorized to work only under limited circumstances. Therefore, the applicant should not look for employment as a means of support while at NMJC. Under no circumstances are students permitted to work full-time during the academic year.

\_\_\_\_\_  
Sponsor's Printed Name

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship to Applicant

\_\_\_\_\_  
Sponsor's Printed Name

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship to Applicant

