



NEW I-20/DS-2019 REQUEST FORM

This request is for: Readmitted student Change education level
 Add dependents Updated financials
 Change of Status Other: _____

Attach a copy of the biographical page of your passport, F-1/J-1 visa stamp, and most recent I-94 record with this request.

STUDENT INFORMATION:

Last Name: _____ First Name: _____ UCR Student ID : _____

U.S. Address: _____ Apt/Unit #: _____ City: _____ State: _____ Zip Code: _____

U.S. Phone#: _____ UCR Email: _____ Visa Type: _____ UCR Major : _____

Permanent Address: _____ City: _____ Country: _____ Postal Code: _____

Degree Level (Check only one): Bachelor's Masters PhD Non-Degree

What quarter will you return? Fall Winter Spring Summer _____ Year

Expected Graduation Date: Fall Winter Spring Summer _____ Year

FINANCIAL INFORMATION

***You are required to attach your proof of financial support document(s) when completing this form**

Please refer to page 2 for Financial Chart to show the minimum required amount in financial support for your program.

Support Type	Amount
Personal Funds	
University Funds	
Family, Parent, or Private Sponsor	
Full Name:	
Relationship:	
Other (Government Funds, Loan, etc.)	
TOTAL	

**J-1 students are required to submit financial support for the entire length of their DS-2019. F-1 students are required to submit proof of funding for one academic year.*

**Required amounts are estimated averages only for the purposes of I-20/DS-2019 issuance. Actual costs may be higher. Amounts are subject to change at any time. Current quarterly fees are available on the Registrar's website.*

By signing this form, I am confirming the funding I listed above is true and accurate.

Student's Signature: _____ Date: _____

DEPENDENT INFORMATION (If applicable): *Spouse or children on **valid** F-2/J-2 status only

Dependent 1:

Family Name: _____ First Name: _____ Middle Name: _____
 Relationship: _____ Email: _____ Ph#: (_____) _____
 Country of Birth: _____ Country of Citizenship: _____ Country of Legal Permanent Residence: _____

Dependent 2:

Family Name: _____ First Name: _____ Middle Name: _____
 Relationship: _____ Email: _____ Ph#: (_____) _____
 Country of Birth: _____ Country of Citizenship: _____ Country of Legal Permanent Residence: _____

Dependent 3:

Family Name: _____ First Name: _____ Middle Name: _____
 Relationship: _____ Email: _____ Ph#: (_____) _____
 Country of Birth: _____ Country of Citizenship: _____ Country of Legal Permanent Residence: _____

FINANCIAL CHART

**For the estimated tuition, fees, and housing amounts, see funding chart below.*

Academic Year (9 months)

	All Undergraduate Programs	Masters/PHD	MBA Program	Professional (Flex) MBA Program (PMBA)	MPP Program	MPAC Program	MFIN Program	MS Business Analytics	Advanced to Candidacy
Tuition, Fees, Health Insurance	\$50,045	\$34,042	\$65,289	\$66,574	\$37,137	\$67,934	\$73,934	\$67,406	\$18,930
Living Expenses	\$23,525	\$23,525	\$23,525	\$23,525	\$23,525	\$23,525	\$23,525	\$23,525	\$23,525
Total for single student	\$73,570	\$57,567	\$88,814	\$90,099	\$60,662	\$91,459	\$97,459	\$90,931	\$42,455

Per Quarter (3 months)

	All Undergraduate Programs	Masters/PHD	MBA Program	Professional (Flex) MBA Program (PMBA)	MPP Program	MPAC Program	MFIN Program	MS Business Analytics	Advanced to Candidacy	On Filing Fee	Summer Fees Only (depends on units enrolled).
Tuition, Fees, Health Insurance	\$16,682	\$11,347	\$21,763	\$22,191	\$12,379	\$22,645	\$24,645	\$22,469	\$6,310	\$1,726	N/A
Living Expenses	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842	\$7,842
Total for single student	\$24,524	\$19,189	\$29,605	\$30,033	\$20,221	\$30,487	\$32,487	\$30,311	\$14,152	\$9,568	\$7,842

Additional Per Dependent (Dependents are Spouse and Children)

	Dependent 1	Additional dependents
One Academic Year	\$6,300	\$4,500
Per quarter	\$2,100	\$1,500
Per month	\$700	\$500

Funds reflect minimum amount of required support. Actual support may be greater.

Estimated average costs above are merely an estimate and are subject to change without notice.

Student Services Building, 2nd Floor • 900 University Avenue, Riverside, CA 92521

Phone: 951-827-4114 • Email: internationalstudents@ucr.edu

Confidential Financial Support Statement

Financial support may be proven in several ways 1) Self Support; 2) University/Departmental Support; 3) Sponsoring Organization, firm or government or 4) Family or other Individual Sponsor Funds.

If your financial support comes from **your family or an individual sponsor**, your sponsor will need to complete this Confidential Financial Support Statement. *Section I – Family or Individual Sponsor Guarantee* must be completed, with original signature. Your sponsor may either ask their bank to sign and certify *Section II - Bank Verification* **OR** may attach an original bank statement in his or her name. The bank statement must 1) be an original 2) clearly show the sponsor’s name in English and 3) be no older than 6 months from the time you will begin or continue your studies at UCR.

FAMILY OR INDIVIDUAL SPONSOR GUARANTEE

Statement of Sponsor Guarantee:

“USD \$ _____ will be available to _____ (Student Name) while at the University of California, Riverside.”

Sponsor(s) Name(s): _____ Relationship to Student: _____

Sponsor(s) Address: _____

Sponsor Signature: _____ Date: _____

Sponsor Signature: _____ Date: _____