



## STATEMENT OF FINANCIAL OBLIGATION

Exchange applicants applying for J-1 Exchange Visitor immigration status are required to provide appropriate documentation of financial support before a DS-2019 form can be issued. Please see the Estimated Exchange Expenses below and know that tuition and fee expenses may vary depending on the conditions of the exchange agreement. In addition to the estimated expenses below, students are responsible for their own transportation to and from their home country. Exchange students should not rely on campus employment to help defray costs.

In addition to completing this form, the exchange student must provide official bank documentation showing that they and/or their sponsor(s) have financial assets above or equal to the total estimate listed below. Bank statements cannot be older than 4 months.

If a student will use a sponsor to satisfy this financial obligation, then the student’s sponsor must either sign below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student’s period of study at CSULB. If more than one sponsor will provide financial support, each sponsor must provide 1) a separate letter declaring intent to sponsor and 2) an official bank statement.

<b>Estimated Exchange Student Expenses in U.S. Dollars (\$)</b>		
These amounts are estimates and are subject to change without notice. Actual expenses may vary.		
Expenses	Fall 2023 or Spring 2024 (5 months)	Academic Year 2023-2024 (10 months)
Books and Supplies	\$800.00	\$1,600.00
Meals and Lodging	\$6,879.00	\$13,758.00
Insurance (for information click <a href="#">here</a> )	\$570.00	\$1,140.00
Other expenses (miscellaneous and personal expenses)	\$2,300.00	\$4,600.00
<b>TOTAL ESTIMATE</b>	<b>\$10,549.00</b>	<b>\$21,098.00</b>

By signing below, the student and sponsor (if applicable) certify that sufficient financial resources will be available to cover all expenses (please see Estimated Student Expenses above) for the duration of studies at CSU Long Beach. Furthermore, by signing below, the student agrees to obtain and maintain adequate health insurance throughout the duration of studies at CSU Long Beach.

Student’s Name \_\_\_\_\_

Student’s Signature \_\_\_\_\_

Date \_\_\_\_\_

Sponsor’s Name \_\_\_\_\_

Sponsor’s Signature \_\_\_\_\_

Date \_\_\_\_\_

Sponsor’s relationship to student \_\_\_\_\_

**Center for International Education**