EASTERN NEW MEXICO UNIVERSITY

# International Undergraduate Student Declaration of Finance

**Office of International Programs | ENMU Station 2 | Portales, NM 88130**
**Administration Building (ADM), Room 216 | Phone: 575.562.4698**

Below is the estimated expense of attending ENMU for one academic year (two semesters). All costs are shown in U.S. Dollars. All fees are subject to change without prior notice.

| Estimated Undergraduate Student Expenses for One Academic Year (Fall 2018/Spring 2019) | |
|---|---|
| Tuition and fees | $8,128 |
| Room and board | $8,212 |
| Books, health insurance, misc. expenses | $2,600 |
| **Total:** | **$18,940** |

## Funding Sources

This section is to be completed by the student. **All blanks should be filled in even if the amount contributed is $0.** All funding listed on this form must be accompanied by an official bank statement. ENMU reserves the right to request verification of all bank statements. Failure to submit an official bank statement may result in a delay in the student's admission.

**Personal:** _____ (Your name) **Amount:** _____

**Institution or organization:** _____ **Amount:** _____

**Government agency:** _____ **Amount:** _____

**Family member or friend:** _____ (Family member/friend name) **Amount:** _____

_____ (Family member/friend name) **Amount:** _____

**ENMU:** _____ (Scholarship(s)) **Amount:** _____

_____ (Award(s)) **Amount:** _____

_____ (Graduate assistantship (part/full-time)) **Amount:** _____

Total of Funding Sources must be **equal or greater than** the total expenses listed in the Estimated Expenses table above. **Total:** 0

## Signature and Acknowledgement

By signing below, I certify the total funding sources listed above are available for each academic year I will be attending Eastern New Mexico University. I am aware the expenses listed above are an estimate and are subject to change without notice.

_____ Student name _____ Student signature _____ Date

_____ Parent, guardian, or sponsor name _____ Parent, guardian, or sponsor signature _____ Date

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