Review the following I-20 cost estimates and indicate the sources of income with which you plan to pay for your education at Oklahoma Christian University.

**I-20 Undergraduate Cost Estimates For 2012-2013 (For a complete list of undergraduate costs see www.oc.edu/cost):

<table>
<thead>
<tr>
<th>Cost Description</th>
<th>Amount</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and fees</td>
<td>$18,800</td>
<td>Fall and spring semesters (15 weeks each)</td>
</tr>
<tr>
<td>Room and board</td>
<td>$5,875</td>
<td>Average freshman room cost &amp; lowest freshman meal plan</td>
</tr>
<tr>
<td>Books</td>
<td>$800</td>
<td>Estimate of $400 per semester for books</td>
</tr>
<tr>
<td>Required health insurance</td>
<td>$874</td>
<td>Student health insurance for one year, August to August</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$26,349</td>
<td>Amount indicated on the I-20</td>
</tr>
</tbody>
</table>

*PLEASE NOTE: The above cost estimates do not include personal expenses, tuition costs for summer semesters, or living expenses during summer or winter breaks.

**How do you plan to provide funds?**

1. Please write below the amount in U.S. dollars available from you, your family, Oklahoma Christian University or another source.

   - Personal funds of student
   - Family funds
   - Confirmed scholarships from OC
     - Specify type
   - Funds from another source
     - Specify type

   **TOTAL (equal to or more than Total Expenses)**

2. Send an original bank letter or an original bank statement that indicates a balance of at least $26,349 minus confirmed scholarships. If your funds will be provided from “another source,” you must send an **Affidavit of Support** from that source stating that they are willing to pay and have the ability to pay. That source must send their original bank statements or letters. This financial documentation must be in U.S. dollars. All bank statements and letters should be in English and notarized or officially sealed.

**When to pay?**

The full amount per semester (fall and spring) for tuition, fees, room, board, books and health insurance must be paid in full at the beginning of each semester. Other living expenses are in addition to this cost.

By my signature below I agree to pay the full amount at the beginning of each semester enrolled.

**Applicant’s Signature** ___________________________ **Date** ____________

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