



— APPLICATION FOR ADMISSION FOR FOREIGN STUDENTS —

**Send to: Office of Graduate and Professional Education
University of Delaware
Newark, Delaware 19716-1501 U.S.A.**

CONFIDENTIAL FINANCIAL INFORMATION

NAME OF APPLICANT (underline family name)	COUNTRY
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Please type or print your responses. **A certified, original bank statement from your sponsor must accompany this form and be returned with your application for admission. The bank statement may not be faxed or copied.** Questions can be directed to foreignservices@udel.edu.

CAN YOU PAY YOUR ROUND-TRIP TRAVEL TO THE UNITED STATES? Yes NO

Consider United States exchange and currency regulations for each item below. Complete in United States dollars.

SPECIFIC SOURCE OF FUNDS: IN HOME COUNTRY	TOTAL AMOUNT AVAILABLE	WHEN DURING THE ACADEMIC YEAR WILL THESE FUNDS BE AVAILABLE?
SPECIFIC SOURCE OF FUNDS: IN THE UNITED STATES	TOTAL AMOUNT AVAILABLE	WHEN DURING THE ACADEMIC YEAR WILL THESE FUNDS BE AVAILABLE?

With respect to the academic year in which you are interested, have you or do you expect to apply for assistance (fellowship or loan) to any other organization, committees, or educational institutions in your home country or in the United States?

GIVE DETAILS:

Provide the information below regarding all persons who will accompany you and be dependent on you for financial support.

NAME	DATE OF BIRTH	RELATIONSHIP	COUNTRY OF CITIZENSHIP	Plan for financial support during the time you may be in the United States

SIGNATURE OF SPONSOR	DATE	RELATIONSHIP TO APPLICANT
SIGNATURE OF APPLICANT		DATE