
INTERNATIONAL APPLICATION Financial Statement (Please type or print with ink)

LINFIELD COLLEGE

Office of Admission · 900 SE Baker Street · McMinnville, OR 97128-6894 USA
Telephone: 503.883.2213 · Fax: 503.883.2472
E-mail: admission@linfield.edu

CONFIDENTIAL REPORT

1. Name: _____ Citizen of: _____
Family First Middle Country

2. Full Address: _____

3. U.S. address if already in the United States: _____

4. Applying for: _____ 20 _____ for a _____ in _____
September/February Degree Subject

5. In case of illness, accident or other financial emergencies, are there sources of emergency funds available to you while you are in the United States? Yes No

List source(s) and amounts of money: _____

6. Are you currently enrolled in a health insurance plan? Yes No

Will this plan cover you while you are in the United States? Yes No *If it does not, you will be required to purchase an insurance policy upon arrival at Linfield.*

7. Please list the name and address of someone who will help you in case of an emergency:

Person in the U.S.

Person outside the U.S.

Relationship to you: _____

Phone: (_____) _____
Area Code

Relationship to you: _____

Phone: (_____) _____
Country Code

8. Does your government impose restrictions on the release of funds for study in the United States? Yes No

If yes, describe the restrictions: _____

Please complete both sides of the form.

CONFIDENTIAL REPORT

In order to issue a Certificate of Eligibility I-20, we are required by the U.S. Government to have the following documentation.

This is to certify that I, _____, have _____ available to me each academic year that
Name of student *Amount of money*

I am in attendance at Linfield College. I acknowledge that Linfield costs may increase an average of 4-5 % per year. The funds come from the following sources:

Academic Year

U.S. Dollars

\$ _____ from savings

\$ _____ from parents or guarantor

\$ _____ from home government

\$ _____ other sources (*describe*): _____

Summer and/or Vacation Periods

\$ _____ Source: _____

\$ _____ TOTAL

I declare that the above information provided is correct and complete. _____ Date _____
Signature of student

Guarantor's Certification

I have read the above statement and find it to be true. I certify that the funds will be forwarded as promised.

Guarantor's signature: _____ Relationship: _____ Date: _____

Address: _____

Bank Certification

I have reviewed the above financial analysis and find it to be a true statement.

Bank official's signature: _____ Date: _____

Name and address of bank: _____

Notarization seal of signing bank:



APPLICATION FOR FINANCIAL ASSISTANCE

Linfield offers a limited number of partial tuition scholarships to international students. In some cases we are able to offer the opportunity to work part-time on campus. Scholarships and work grants are competitive and based on academic performance as well as financial need.

To be considered for financial assistance, please submit a personal letter with your application for admission. Your letter should explain why you would be a good candidate for scholarship. Notification of scholarship and work grants will accompany your letter of admission.
