



# Certification of Finances Form

**THIS FORM AND A CERTIFIED BANK STATEMENT DATED WITHING THE LAST SIX MONTHS MUST BE PROVIDED TO THE FINANCIAL AID OFFICE AT COTTEY COLLEGE.**

Student's Name (as on passport) \_\_\_\_\_

Approximate cost to attend Cottey College for the 2022-23 academic year (not including summer and subject to change)

	Academic Year
Tuition and Fees	\$22,770
Living Expenses (Double room with meals)	\$7,800
Textbooks and Supplies	\$1,100
Required Health Insurance	\$1,989
Personal	\$1,494
<b>Total</b>	<b>\$35,153</b>

Do you have a source for emergency funds once you arrive in the U.S.?  Yes  No

If yes, name of source \_\_\_\_\_

Do you plan to remain in the U.S. during the summer?  Yes  No

If yes, with whom will you stay during holiday and summer breaks when the college is not in session?

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**PLEASE SHOW THE TOTAL AMOUNT OF FUNDS AVAILABLE TO YOU IN US DOLLARS (MUST ATTACH A SEPARATE CERTIFIED BANK STATEMENT)**

**If a parent or sponsor is providing funds, they must complete the certification section below.**

Source:	Amount:
A. From Student's Own Savings	\$
B. Form Parent/Family	\$
C. From Sponsor	\$
D. From Other Source (specify) _____	\$
<b>Total</b>	<b>\$</b>

I certify that the information on this form is correct and complete.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

## Certification of Parent or Sponsor

I certify that I will provide financial support in the amount shown above for the applicant.

Parent/Sponsor Name \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Parent/Sponsor Email \_\_\_\_\_

Parent/Sponsor Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return Form to:**  
Financial Aid Office  
Cottey College  
1000 W Austin Blvd.  
Nevada, MO 64772

**Fax Number** 417-448-1046  
**Email** [financialaid@cottey.edu](mailto:financialaid@cottey.edu)

Documents can be uploaded in my.cottey.edu under the finances tab, financial aid file upload, choose other.