MTSU is an equal opportunity, non-racially identifiable, educational institution that does not discriminate against individuals with disabilities.

College of Graduate Studies
Financial Statement Form

MTSU ID # (If Known)  Last Name/Family Name  First Name/Given Name

Estimated tuition and registration fees are $20,052 for a graduate student per academic year (based on nine credit hours per term—fall and spring terms only). This estimate does not include housing and a meal plan. As rates vary according to what the student may choose, please refer to the MTSU website for current plans and prices at http://www.mtsu.edu/bursar/rates_main.php. Summer sessions may be attended at extra cost.

MTSU purchased insurance cost of premiums are estimated from $400 per semester to $1,500 per calendar year, depending on the student’s age.

A graduate student should also expect to spend approximately $1,000 per year for textbooks and supplies. Added costs of housing, meals, travel, clothing, personal items, and miscellaneous expenses are estimated at $10,000 per year. The applicant, therefore, should have a total of at least $31,000 for an academic year.

The $31,000 total is an estimated average of graduate tuition, registration fees, housing, meals, insurance and personal expenses. Actual expenses may be higher or lower depending on each student’s personal needs and preferences and are subject to change without notice.

ALL PRICES QUOTED ARE SUBJECT TO CHANGE WITHOUT NOTICE

It is the applicant’s responsibility to have his/her financial situation in order before entering the University. A student must pay for his/her tuition, room, meal plan, insurance and fees upon registration each semester. The University does not have provisions to accommodate students arriving with insufficient funds. Students not complying are in jeopardy of invalidating their immigration status and can be subject to deportation.

To maintain legal non-immigrant status, graduate students must enroll for a minimum of nine (9) credit semester hours. Graduate students that have been officially awarded a Graduate Assistantship are allowed to register for a minimum of six (6) graduate credit hours. Non-compliance with these regulations will jeopardize a student’s immigration status and can lead to deportation.

I have read the above information and certify that I have sufficient funds to defray all expenses mentioned above.

Signature of Graduate Applicant  Date
Applicant Information:

MTSU ID # (If Known) __________ Last Name/Family Name __________ First Name/Given Name __________

Sponsor Information: (Please Print)

Name: __________________________________________

Complete Address: __________________________________________

Relationship to Applicant: _____ Father _____ Mother _____ Brother _____ Sister

_____ Aunt _____ Uncle _____ Other: __________________________

By signing as a sponsor, you are agreeing to sponsor a student financially. United States Customs and Immigration Service and Middle Tennessee State University expect that you willingly defray the student’s expenses. It is unethical to have a student arrive in the United States to learn that the funding promised has been withdrawn. It is detrimental to this type of visa holder as they cannot work outside the campus community nor make enough money on campus to pay for tuition, fees and living expenses.

I have read the above information and certify that I will sponsor the before mentioned student’s financial needs. I am financially capable to supply the amount of at least $31,000 USD for his/her educational and living expenses per each academic year (excluding summers) at Middle Tennessee State University.

Signature of Sponsor __________ Date __________

Verification of Financial Responsibility from Banking Institution

Information must be printed in English

This financial institution certifies that the applicant or sponsor has currency greater than or equal to $31,000 USD.

Account Type (circle all that apply): Checking / Savings / Other: __________________________

Financial Institution Representative Information (Please Print):

Name: __________________________________________ Title: __________________________

Telephone: __________________________ Fax: __________________________

Address: __________________________ Institution Stamp

Signature of Financial Institution Representative __________ Date __________