

## **Student Declaration of Finance - Canada** **Estimated Cost of Attendance 2025-2026**

Below is an estimated expense of attendance for one academic year (2 semesters, 15 credits per semester, summer expenses excluded) based on expected DSU Institutional expenses only. All amounts are listed in and fees must be paid in US American Dollars (USD). Students should not expect to rely on on-campus employment to continue studying at any US university. See <https://dickinsonstate.edu/admissions/tuition-and-cost-to-attend/index.html> for more information. By completing this declaration, you are verifying your financial ability to live and study at DSU. Proof of medical insurance coverage may be required.

### **Estimated Expenses**

<b>Expense Source</b>	<b>Expenses</b>
Tuition and Fees	\$9420
Housing	\$3360
Dining	\$5210
Estimated Books and Supplies	\$1700
<b>Total Expenses</b>	<b>\$19690</b>

This section is to be completed by the student. To be considered complete all blanks in sections A, B, C, D, and E must be filled out even if the amount contributed is \$0. Section F is the total of the amounts listed in sections A, B, C, D, and E added together. All funds listed on this form must be accompanied by an official bank statement or other relevant financial agreement. DSU reserves the right to request verification of all bank statements. Applicants will not be issued either an I-20 or DS-2019 without submitting sufficient financial documents. A bank statement used for two or more students must show sufficient funds to cover expenses for all students and a separate copy of the bank statement must be submitted for each student.

<b>Section</b>	<b>Funding Source</b>	<b>Sponsor Name</b>	<b>Amount</b>
A	Personal	<u>Self:</u>	\$
B	Sponsor (Institution or Organization)	<u>Sponsor:</u> <u>Sponsor:</u>	\$ \$
C	Government	<u>Agency:</u>	\$
D	Relative or Friend or Parent	<u>Parent:</u> <u>Friend/Relative:</u>	\$ \$
E	DSU Scholarship/Awards	<u>Scholarship:</u> <u>Award:</u>	\$ \$
F	Total Expenses (must be <i>equal or greater</i> than the total expenses listed in the Estimated Expenses Table above)	<u>Total:</u>	\$

**By signing below, I certify the total funds listed above in Section A, B, C, D, and E are available for each academic year I will be attending Dickinson State University. I am aware the tuition and fees listed above are an estimate and are subject to change without notice.**

Student Name:	Signature:	Date:
Parent Name:	Signature:	Date:
Sponsor Name:	Signature	Date:

Please submit this form and supporting documentation to [dsu.hawk@dickinsonstate.edu](mailto:dsu.hawk@dickinsonstate.edu).