International Advising

Canadian Application for Form I-20 and Certification of Financial Responsibility

Submit this form and supporting documentation to:

Lake Region State College
International Admissions
1801 College Drive North
Devils Lake, ND 58301, USA
Fax: 701-662-1570
brady.c.weber@lrsc.edu

Prior to completing this form, an application for admission should be submitted. International students must meet all requirements for admission and be accepted into a full-time program of study. This form collects the necessary documentation to generate the Form I-20.
PART I: Personal Information (* indicates a required field)

1. Gender*  □ Male  □ Female
2. Birthdate* _____/_____/______ (month/day/year)

3. Enter your name exactly as shown on your country’s passport* Attach a copy of your passport to confirm.

   Family Last Name ____________________________  First Given Name ____________________________  Middle Names ____________________________

4. Your permanent, physical address in your home country. Postal boxes are not accepted.

   Number and street ____________________________________________________________

   City ____________________________  State/Province ____________________________  Country ____________________________  Postal Code ____________________________

5. Address in the United States (if known).

   Number and street ____________________________________________________________

   City ____________________________  State/Province ____________________________  Country ____________________________  Postal Code ____________________________

6. Email* ____________________________  7. Telephone* ____________________________

8. Country of Birth* ____________________________  9. City of Birth* ____________________________

10. Country of Citizenship* ____________________________

11. Country of Permanent Residence* ____________________________

12. Will you be attending LRSC as an athlete? □ YES  □ NO
   If yes, in what sport will you be participating in? ____________________________

PART II: If you are in the United States now, complete this section. If not, continue to Part III.

14. What is your current visa status?

   □ F-1  - What is your SEVIS Number? ____________________________

   □ If not F-1, what is your current visa status? ____________________________

15. Do you plan to travel outside the U.S. before school starts? □ YES  □ NO
PART III: If you are not currently in the U.S., complete this section.

16. Have you ever attended school in the U.S. in F-1 student status? □ YES  □ NO

   a. If yes, what was the last date of attendance? 

      If you attended a U.S. school last term and are home on holiday between academic terms, you are considered a “School Transfer” and need to have your SEVIS record transferred to LRSC before your new Form I-20 can be issued. Please work with your current international student advisor at your previous school to authorize the release of your SEVIS record to us.

PART IV: Preferred Shipping Method

☐ Email the I-20 to the e-mail address listed above in Part I.

☐ Mail to address listed in Part IV. Form I-20’s are mailed via express delivery. The cost of express delivery will be added to your account.

Shipping Address
Print the name and address in English, exactly as it should appear on the envelope. For express shipping, postal boxes are not accepted, and a physical address is required.

________________________________________  ______________________________________
Recipient’s First (Given) Name  Recipient’s Family (Last) Name

________________________________________  ______________________________________
Company/Business Name (If applicable)  Phone Number

________________________________________
Physical address Number and Street

________________________________________  ______________________________________  ______________________________________  ______________________________________
City  State/Province  Country  Postal Code

Please note: I-20 documents can only be picked up or mailed to either yourself or a parent / legal guardian (if under the age of 18). Third-Party options are not allowed under U.S. federal policy.
PART VI: Financial Statement
Estimate of annual expenses for Canadian Students (2024-2025)

Below is a modest budget for one academic year at Lake Region State College. Tuition and fees may vary by delivery method and/or program. Please enter your estimated costs or housing and food. **Total sources of funding must exceed the Estimated Annual Expenses of attending Lake Region State College for one academic year.** All sources of funding are expected to be available through the entire length of study at LRSC.

Name of class / program interested in attending _______________________________________

Program start and end date _______________________________________________________

<table>
<thead>
<tr>
<th>Estimated Annual Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and Fees</td>
<td>$5,520.00</td>
</tr>
<tr>
<td>Housing</td>
<td>$3,300.00</td>
</tr>
<tr>
<td>Meal Plan</td>
<td>$5,600.00</td>
</tr>
<tr>
<td>Books and Supplies</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>Misc. (personal items, clothing)</td>
<td>$1,000.00</td>
</tr>
<tr>
<td><strong>Total Required Costs</strong></td>
<td><strong>$16,420.00</strong></td>
</tr>
</tbody>
</table>

**Sources of Funding**

<table>
<thead>
<tr>
<th>Sponsor/Source</th>
<th>Name and address of sponsor / source</th>
<th>Guaranteed funds in USD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Savings(^1)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Parents (^1, 2)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Friends (^1, 2)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Loans (^3)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Scholarships (^4)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Your Government (^4)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

**Documentation required by sponsor or source:**

\(^1\) Official bank letter or statement from the account noting the amount
\(^2\) Sponsor Certification Form
\(^3\) Official certification from the lending institution
\(^4\) Official letter confirming type and amount of award
Student Certification of Financial Statement

I certify that the information provided above is complete and correct and that I have attached the required supporting documentation. The sources of funding will carry over to future years at Lake Region State College. Should there be changes to my funding or sources of income, I will notify my international advisor within 10 days.

My signature below indicates that I understand that I am responsible for all tuition, fees, and living expenses that I incur during my attendance at Lake Region State College. I further understand that with the exception of any scholarship or assistantship already offered to me by the university, I do not expect Lake Region State College to provide me with financial assistance or employment.

If I am granted admission, I agree to be informed and knowledgeable about the United States federal regulations pertaining to international students and to comply with all relevant laws.

____________________________________________  ______________________________________
Student’s Signature                                    Date

____________________________________________________
Printed Name
Sponsor Certification Form

This is to certify that I, the sponsor, ___________________________, will provide funds in the amount of no less than USD $ ______________ in support of ____________________ for their tuition and fees, room and board, books and supplies, and personal expenditures for ever year the student's program of study at Lake Region State College.

My relation ship to the student is _____________________________________________.

My address is:

__________________________________________________________________________
Number and street

__________________________________________________________________________
City State/Province Country Postal Code

__________________________________________________________________________
Phone Number Email

_____________________________________________                  ______________
Signature Date

_____________________________________________
Printed Name

*In addition to completing this Student Certification Form, an official bank letter or statement from the account noting the account owner and balance must be included.