# INTERNATIONAL STUDENT FINANCIAL COMMITMENT

**SECTION 1: APPLICANT INFORMATION**

SMU ID# _____

Legal Name: _____ _____

**Family Name** **Given Name (s)**

Date of birth _____ /_____ /_____

**Month** **Day** **Year**

I do hereby certify that:

I will have sufficient funds in U.S. currency available to me for each academic year to cover the cost of tuition and fees, and living expenses, plus adequate funds for my travel to and from the U.S. and for personal expenses.
These funds can and will be provided during my entire period of studies by the individual or agency noted in Section 2.
I can have the necessary funds transferred to the U.S. ane insurance unless waived by the SMU Health Center.

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