
Student Certification of Finances

The purpose of the *Student Certification of Finances* is to obtain accurate information about the funds available to applicants who want to study at Jacobs University Bremen. Please consider, that all students studying at Jacobs University Bremen are responsible for covering their living expenses with their own funds. When applying for a student visa to Germany, it is a required part of a student's visa application to prove that a minimum of 10.500 EUR are available to them. Please consider this when completing this form.

Cost of Attendance 2021-2022

Tuition	20.000 EUR
Room & Board	8.000 EUR
Fees	650 EUR
Total Cost of Attendance	28.650 EUR

You will find more detailed information on our Cost of Attendance info sheet here: https://www.jacobs-university.de/study/cost_of_attendance

Please upload this document to your Online Financial Aid Application form under the *Student Certification of Finances* section.

I. Student Data

Your full name _____

Your date and place of birth _____

Your country/countries of citizenship _____

Your e-mail address _____

Your mailing address _____

II. Contact

For any questions or concerns about this form or your financial aid application, please contact:

Jacobs University Bremen
Office of Student Financial Services
Campus Ring 1 | 28759 Bremen | Germany
sfs@jacobs-university.de
+49 421 200 4210

III. Student's Sources of Funds and Official Certification of Funds and Amounts

Please complete all sections that are relevant to your financial situation.

STUDENT'S SOURCES OF FUNDS	LEVEL OF FINANCIAL SUPPORT GUARANTEED	LEVE OF FINANCIAL SUPPORT EXPECTED		OFFICIAL CERTIFICATION OF FUNDS AND AMOUNTS This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.
	FIRST YEAR	SECOND YEAR	THIRD YEAR	
Please enter all amounts in EUR				
a. PERSONAL OR FAMILY SAVINGS				FULL NAME AND TITLE OF BANK OFFICIAL _____ SIGNATURE OF BANK OFFICIAL (see certification statement above) _____ DATE: _____
NAME OF BANK _____ ADDRESS OF BANK _____ _____				
b. PARENT(S) or LEGAL GUARDIAN				SIGNATURE OF PARENT(S) OR LEGAL GUARDIAN (see certification statement above) _____ FULL NAME(S) _____ _____ DATE: _____
Funds available from sources other than savings (such as earnings). Please describe the source: _____ _____				
c. SPONSOR				SIGNATURE OF SPONSOR (see certification statement above) _____ FULL NAME _____ _____ RELATIONSHIP OF SPONSOR TO STUDENT: _____ DATE _____
Funds available from sources other than savings or parents. _____ Name of sponsor Please describe the source: _____ _____				
d. YOUR GOVERNMENT				Enclose with this form a signed copy of your letter of award.
_____ Name of agency				
TOTAL FINANCIAL SUPPORT	EUR	EUR	EUR	

V. Certification

I hereby certify that the data contained on this form is true, correct and complete to the best of my knowledge. I understand that I may be denied financial assistance if I make false or misleading statements on this form.

Student's Signature _____ Place and Date _____