FINANCIAL VERIFICATION

Slippery Rock University of Pennsylvania

Prior to issuing an I-20, Slippery Rock University must have a financial statement on file. This information is to be provided by the person or agency who has agreed to provide financial support for a non-immigrant student at Slippery Rock. This information is a required part of the admissions process.

GRADUATE ESTIMATED COST

To fairly compare costs between universities, be sure to look at both institutional and additional costs. All costs are subject to change on an annual basis.

	AT	SAHE or CHMC	DPT	PA	OT
TUITION FEES:	$43,755.00	$26,775.00	$52,840.00	$67,062.00	$45,918.00
LIVING EXPENSES:	$ 10,880.00	$ 10,880.00	$ 10,880.00	$ 11,380.00	$ 10,880.00
Other Costs:	$ 1,700.00	$ 1,700.00	$ 1,700.00	$ 1,700.00	$ 1,700.00
Total Estimated Cost:	**$ 56,355.00**	**$ 39,355.00**	**$ 65,420.00**	**$ 80,143.00**	**$ 58,498.00**

Other Costs Comment: *Personal Expenses*

The tuition rate is determined by the Board of Governors of the State System of Higher Education. Books, supplies, and personal living expenses are not billed by SRU. Actual costs are dependent on a student's personal spending. For purposes of estimating room & meals for immigration the average on campus housing cost is used and the standard 14 meals per week.

Graduate Assistantships are not factored into the verification of finances. If a graduate international applicant is awarded an assistantship and provides documentation to the DSO/PDSO then the award amount from the school will be included on the Form i-20.

APPLICANTS INFORMATION

SURNAME:

FIRST NAME:

TERM OF ENTRY: (e.g., Fall 2026)

GRADUATE PROGRAM

(select one)

- MS, Athletic Training, (AT) ◯
- MA, Student Affairs in Higher Education (SAHE) ◯
- MA, Clinical Mental Health Counseling, (CMHC) ◯
- DPT, Doctor of Physical Therapy (DPT) ◯
- MS, Physician Assistant Studies (PA) ◯
- DOT, Doctor of Occupational Therapy (OT) ◯

FINANCIAL AFFIDAVIT

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Slippery Rock University of Pennsylvania

SPONSOR'S INFORMATION

Sponsor's Full Name:

Sponsor's Annual Salary USD$:

Sponsor's Savings Account USD$:

Sponsor's Occupation:

Sponsor's Relationship to applicant:

Sponsor's Address:

AFFIRMATION OF SPONSOR

I affirm that I intend to financially sponsor the applicant indicated on this form and all information supplied on this Financial Affidavit is true and correct.

Sponsor's Signature

Date (mm/dd/yyyy)