Nebraska Omaha Omaha INTENSIVE LANGUAGE PROGRAM (ILUNO)

For ILUNO Students Only: Estimated Expenses for the 2024 - 2025^{*} Academic Year

2024-25 ESTIMATED EXPENSES - 16 WEEKS (2 SESSIONS)**

\$4,086 \$ 763	Tuition*** Fees	* This budget covers a 16 week period for a single student living on campus enrolled in ILUNO full-time (18 hours per session). Students may anticipate an increase in the estimated cost each year. This does not include travel expenses to and from the U.S.
\$ 400 \$6,065	Books and Supplies Room and Board	 ** All figures are estimate and subject to change without notice. This estimate of expenses does not include transportation to and from Omaha. *** Transfer students may be able to pay tuition for 8 weeks.
\$2,016 \$1,522 TOTAL:	Health Insurance	 *** Actual personal expenses will vary based on lifestyle. Personal expenses DO NOT include money for cultural activities and/or souvenirs. *** When a spouse and/or children are accompanying the student to the United States, students are required to demonstrate additional support: \$2,750 for the each dependent. This needs to be added to the estimated total listed above.

THIS SECTION TO BE COMPLETED BY THE APPLICANT All fields required.

Name					
Family/Lo	ist Name	Given/First Name	Middle Initial (optional)		
NUID Number		Other names used			
Date of Birth	Email Addre	\$\$			
SOURCES OF	SUPPORT All fields required.				
	k Documents must be signed, star	, .	nust submit original Bank documents including an ocuments must be current or within 6 months from		
<u>First-Year Amount</u>	Personal Savings				
\$					
Personal Savings Amount	Name of Your Bank	Loco	ation of Bank		
	Personal Sponsors (family members and others): All sponsors are required to complete Part 2 of this form and provide current bank statements. Use additional copies as needed. Students in the U.S. may not act as sponsors.				
\$	Sponsor #1				
Personal Sponsor 1 Amount	Name		Relationship to You		
\$	Sponsor #2				
Personal Sponsor 2 Amount	Name		Relationship to You		
\$			zation, university, employer, etc.) Attach current officion ic amount of support, and period of time covered by th		
Sponsoring Organization Amount	Name of Sponsoring Organ	nization			

APPLICANT'S STATEMENT All fields required.

Icertify that I will have a minimum of U.S. \$14,852 available to me for each 16-week period I study in ILUNO.

I am prepared to fund my program of studies on the basis of my present resources (certified on this occasion) without relying upon future potential sources that have not materialized.

Applicant's Signature	Date	
Parent Signature (if under 19 years of age)	Date	

Office of International Admissions | 111 EAB, 6001 Dodge Street, Omaha NE 68182-0080 | 1.402.554.2293 | unointernational@unomaha.edu | admissions.unomaha.edu

The University of Nebraska does not discriminate based on race, color, ethnicity, national origin, sex, pregnancy, sexual orientation, gender identity, religion, disability, age, genetic information, veteran status, marital status, and/or political affiliation in its programs, activities, or employment. 0098FORMUGA0919

Nebraska Omaha O INTENSIVE LANGUAGE PROGRAM (ILUNO) FINANCIAL AFFIDAVIT

For ILUNO Students Only: Estimated Expenses for the 2024 - 2025* Academic Year

List all dependents who will travel with you to the United States.

Family Name	Given Name	Date of Birth	Country of Birth	Country of Citizenship	Spouse, Son, or Daughter

Applicant: If you are receiving sponsored support, then all fields below must be filled out.

If your support is coming from your own personal funds, then it is not necessary to complete this section.

ABOUT THE SPONSOR	SPONSOR'S CONTACT INFORMATION
Full Name	Email
Relationship to Applicant	Phone (if in U.S.)
Country of Citizenship	Mailing Address
If you are not a U.S. citizen and you have a U.S. address: Visa Type:	
Are you a student? 🗌 Yes 🗌 No	City State/Providence Postal Code
	Country

SPONSOR'S BANK

Name of Bank	
Location of Bank	

All financial documentation should be photocopied and original documents made available to the student when arranging visas at the American Consulate.

SPONSOR'S AFFIDAVIT

I hereby guarantee without reservation to maintain and support (<i>student's name – required</i>)	for educational			
costs and living expenses while this student is enrolled in ILUNO. I understand that the applicant, if accepted to ILUNO, will be a full-time student who may				
not accept off-campus employment unless permission is granted. This permission is hard to obtain and must not be assumed to be available.				
I hereby promise to provide (<i>amount – required</i>) U.S. \$ for the first year of study. I will arrange to provide a major portion of the money to the student at the time of arrival to include housing costs, insurance, books, and tuition.				
I certify that the information and guarantee provided on this page is accurate, complete, and true. Any information given falsely or withheld will affect the decision on the student's application and may make the student ineligible for enrollment.				
I am attaching a current statement from my bank attesting to my financial status.				
Sponsor's Signature	Date			
Applicant's Signature	Date			

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