

International Student Personal & Financial Verification Form

- 1. Complete this form and submit it with your application materials, along with any required financial documentation as specified on the back page.
- 2. Include a copy of your passport with your application materials.

Exception for Other Nonimmigrant or Immigrant Visa Status: If you do not need F-1 or J-1 visa sponsorship from the University of Oregon, you only need to submit the Student Information, page 1. You do not have to submit the Financial Verification, page 2. Please submit page 1 with your application materials.

STUDENT INFORMATION		DATE: (mm/dd/yyyy)		
Pa	ssport Family Name or Surr	1ame		
Pa	ssport Given Name:			
Da	te of Birth: (mm/dd/yyyy) _	Gender: (male/female)		
Cit	y of Birth:	Country of Birth:	Country of Citizenship:	
Em	nail:			
Pe	rmanent Address in Home	Country: U.S. regulations rec	quire an address and phone outside the U.S.	
St	reet Address:			
Cit	_у:	Province:	Postal Code:	
Country: Phone:		P	hone:	
Cu	rrent Mailing Address:	□ My N	Nailing Address is the same as my Permanent Address	
St	reet Address:			
Cit	су:	Province:	Postal Code:	
Со	untry:	P	hone:	
En	nail:			
ST	UDENTS CURRENTLY IN TH	E U.S.		
1.	Are you currently in the U	S? □Yes □No If"Yes,"c	omplete 2, 3, and 4. Otherwise, skip to the next page.	
2.	What is your visa status i	n the US?		
З.	If you are in F-1 or J-1 visa	status, are you currently en	rolled? 🗆 Yes 🗆 No	
4.	Are you on F-1 OPT or J-1 Academic Training? 🛛 Yes 🛛 🗛 🖓			
	a. Name of School or l	Jniversity:		
	b. City and state whe	e school is located:		
	c. Last date of expect	ed attendance or OPT perio	d: (mm/dd/yyyy)	



FINANCIAL VERIFICATION

Total Estimated Expenses for 2025-26:

EXPENSE	LAW GRADUATE (in USD)
Tuition and fees (9 credits/term)	\$62,609
Living expenses	\$15,846
Educational and personal expenses	\$6,150
Health insurance	\$3,516
TOTAL	\$88,121

Who Will Sponsor You? Check all that apply	Amount of Support Enter amount in USD	Attach Required Documentation Documents must be less than 6 months old.
□ Self or Parents	\$	Bank statement with a current available balance.
□ Relative or Sponsor	Ş	Name(s): Relationship to Student: 1. Sign the statement of financial support below. 2. Bank statement with a current available balance.
□ Gov't or Other Sponsor	S	Name: Documentation from your government, employer, or scholarship agency with amount of funding.
□ Scholarships/Awards, Other Funding	\$	Documentation from funding source with amount of award.
TOTAL AMOUNT	\$	Total amount must meet or exceed the total estimated expense above.

RELATIVE/SPONSOR'S STATEMENT OF FINANCIAL SUPPORT

By signing this document, I agree to be financially responsible for the student named above while they attend the University of Oregon. I understand that all costs may be subject to change.

Relative/Sponsor's Signature: ______ Date: (mm/dd/yy) ______

STUDENT'S CERTIFICATION

I certify that all information I have provided is correct and complete. I agree to be fully responsible for my tuition, fees and all living expenses while studying at the University of Oregon. I understand that submission of false or inaccurate information will be considered sufficient cause to terminate my application or enrollment and that failure to pay all debts to the University of Oregon may result in immediate dismissal.

Student Signature: ____

_____ Date: (mm/dd/yy) _____

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