

This form should be uploaded through your Lehigh Applicant Portal via the Admissions Checklist. You must first submit your application to establish your Lehigh Applicant Portal. If you have questions, please email LUinternational@lehigh.edu.

## **International Undergraduate Financial Certification Form**

If you will need financial aid during any of your intended years of undergraduate enrollment at Lehigh, this form is to be completed and submitted along with your other admissions-related application materials. Your application for admission will not be considered complete until this financial certification form is received.

	Full Last/Family name	Full First/Given Name	Full Middle Name
Date of Birth: / /	(Month/Day/Year)		
Country of Birth:	Countries of Ci	tizenship:	
Permanent Address:			

How many years do you intend to enroll at Lehigh as an undergraduate student?

You are required to certify the amount of funds that you will have available for your tuition and living expenses for all years indicated above at the time of your application. If your enrollment ends up exceeding the number of years indicated on this form, then we are unable to provide need-based financial aid for those years. If your family does not have the ability to pay the annual costs for all years indicated, you must also submit the CSS Profile so that we can determine your eligibility for need-based financial aid. The projected cost of attendance for the 2025-2026 award year is \$89,800. Please note that if admitted to Lehigh, there will not be additional funding awarded beyond the initial financial aid offer outside of adjustments made based on increases in cost of attendance. We are unable to provide additional financial aid for flights or due to changes in the value of your home country's currency during your enrollment at Lehigh.

	Projected Support* (Amounts in U.S. Dollars)			
Source of Funds	2025-2026	2026-2027	2027-2028	2028-2029
Self-Support	\$	\$	\$	\$
Parents or Individual Sponsors Your sponsor must sign the certification portion below	\$	\$	\$	\$
Your Government Attach an official notification of your award	\$	\$	\$	\$
Other (Specify)	\$	\$	\$	\$
TOTAL:	\$	\$	\$	\$

\*A bank statement showing the above "Projected Support" for one full year will be required for matriculated students in order to secure an I-20.

## **APPLICANT'S CERTIFICATION**

I certify that I have read the information above, that is true and accurate, and that the funds are available.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_/ (Month/Day/Year)

## Official Certification by family or Individual Sponsor

I guarantee that I will provide to the above named applicant the amount indicated on the above chart, for purposes of full-time study at Lehigh University.

Sponsor's Signature: \_\_\_\_\_ Date: \_\_\_\_ /\_\_\_\_ (Month/Day/Year)

Sponsor's Name (please print): \_\_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_\_