

International Student Application (cont.)

13. Financial Resources: Study in the United States is a long, difficult and expensive undertaking. It is very important to know in advance the extent of your financial resources. Please respond to the questions below.

14. Indicate the amount (in USD \$ dollars) of money you expect to receive every month from your own funds or other sources while attending Napa Valley College:

\$: _____

15. Name the source (s) of the above income _____

16. How long will you be guaranteed this support? _____

17. If anyone other than you or your parents will supply (or be responsible for) any part of your financial support while attending Napa Valley College, please provide the name and address of this person: _____

Relationship of this person to you: _____

18. Insurance: Do you or will you have your own health and accident insurance while attending Napa Valley College?

Yes

No

If Yes, give the name and address of the insurance provider/company _____

19. If you do NOT have insurance, you will be required to enroll in a group policy. Do you agree to this?

Yes

No

Your Signature

Your Sponsor's Signature

Date

Return this completed form and all requested documents to:

Admissions and Records Office
Napa Valley College
2277 Napa-Vallejo Highway
Napa, CA 94558 USA
ATTN: International Student Admissions
Email: MCeja@napavalley.edu