

UNIVERSITY OF  
**CENTRAL MISSOURI**  
— GRADUATE AND —  
INTERNATIONAL STUDENT SERVICES

Ward Edwards 1800 · Warrensburg, MO 64093 · Phone: 660.543.4092 · Fax: 660.543.4778 · giss@ucmo.edu

**Declaration of Financial Support  
University of Central Missouri**

I, \_\_\_\_\_, will be providing  
Sponsor's Printed Name

\_\_\_\_\_ with full financial support during his/her study  
Student's Printed Name  
at the University of Central Missouri.

I understand that the cost per academic year of attending the University of Central Missouri is approximately (In US Dollars):

**Undergraduate Students**

Professional Pilot ASEL Track - \$38,686.00, AMEL Track – \$40,919.00

All other majors - \$22,904.00

**Graduate Students**

Big Data Analytics and Info Tech., CIS and IT, Computer Science and Cybersecurity - \$18,931.00

MBA - \$20,567.00

Speech Language Pathology - \$24,435.00

All other majors main campus - \$23,085.00, MIC campus - \$18,385.00

**IEP (English Classes) to Degree** (While taking IEP Classes) - \$22,754.00

**ELIPS English Pathway Program** (While taking both IEP and academic) - \$22,904.00

**THRIVE Program** - \$23,411.00

**Dependents (F2/J2 visa)** - Additional \$4,000 per dependent

I herewith declare that I have adequate funds available to provide the financial support necessary for the above-named student's educational program.

To verify that adequate funds are available, I will also provide a copy of an official bank statement/certification along with this declaration for your review.

\_\_\_\_\_  
Sponsor's Signature

\_\_\_\_\_  
Sponsor's Relationship to Student

\_\_\_\_\_  
Date