



## CERTIFICATION OF UNIVERSITY FUNDING FOR GRADUATE INTERNATIONAL STUDENTS

This form is required for new or continuing graduate-level international students who will be supported fully or in part by a UNC-Chapel Hill graduate assistantship. Newly admitted international students receiving assistantship awards will need to upload this form along with the Financial Certificate and other supporting documents in his or her Student Center in ConnectCarolina. Current students applying for a program extension or other immigration benefit should submit this form to the ISSS office along with the appropriate application form. Information for new international students is available on the ISSS website at <http://iss.unc.edu/newstudent/> and information for current students is available at <https://iss.unc.edu/current-students/>.

### SECTION I: TO BE COMPLETED BY STUDENT

Name: \_\_\_\_\_ PID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current/Prospective Degree Level: Bachelor's    Master's    Doctoral    Other: \_\_\_\_\_

Academic Plan/Major(s): \_\_\_\_\_

### SECTION II: TO BE COMPLETED BY UNC-CH PROGRAM OR STUDENT SERVICES MANAGER ONLY

Please certify funding for the above named student by providing the information requested below. Electronic signatures will be accepted, but if you are unable to provide one, please print and sign the form, and then provide a scanned copy to the student. Also attach a **copy of an award letter** that specifies the following information: a) stipend amount provided to student b) partial or full coverage of tuition, fees and/or health insurance and c) length of time the award is expected to last.

Type of award: Research Assistantship    Teaching Assistantship    Other (Specify): \_\_\_\_\_

Duration: 9 months    12 months    Other (Specify): \_\_\_\_\_

Stipend amount (award disbursed directly to student per academic year): \_\_\_\_\_

The Department/University will cover the following, in addition to the stipend listed above (*please check all that apply*):

Full Tuition    Student Fees    Health Insurance    In-State Tuition Only

Is there strong likelihood of program funding in similar amounts for remainder of the student's program?    Yes    No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Campus Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_