

Please read the information below before completing the Foreign Citizenship Form for I-20 Issuance and the 2026-2027 Financial Certification Form. The forms should be submitted as early as possible and **no later than June 15, 2026**.

## Form I-20

The Form I-20, "Certificate of Eligibility for Nonimmigrant Status" is a paper record of your information in the Student and Exchange Visitor Information System (SEVIS) and is required to apply for the F-1 Visa, enter the U.S. and is used throughout your time as a student in the United States. The I-20 includes important information including your SEVIS ID Number, your class of admission, program of study and your program start and end date.

## Getting an I-20

In order to be issued an I-20 by NECO, you will need to complete and send the following information to the Registrar's Office at [registrar@neco.edu](mailto:registrar@neco.edu):

1. **Foreign Citizenship Form for I-20 Issuance**: The information on this form is used to create your SEVIS account and should match the information in your passport.

If you are planning to bring any dependents (spouse and/or children under 21) to live with you in the U.S. during your course of study, you will need to provide their information (including copy of passport page) on this form since they will also be issued an I-20 on an F-2 visa.

2. **A copy of your passport photo page**, both photo and signature pages.
3. **2026-2027 Financial Certification Form**: To be issued an I-20, the Student and Exchange Visitor Program (SEVP) requires that you demonstrate you have sufficient funds for your tuition, fees, and living expenses. NECO requires proof of funding for one academic year. You must list your sources of funding and provide documentation of proof of funding. Please refer to the "Table of Estimated Minimum Expenses in U.S. Dollars for the 2026-2027 Academic Year" for the total amount of funds you will need for one year at NECO.

## Sources of Funding Guidelines

NECO accepts readily available/liquid assets, such as a checking or savings account, or accounts where the account holder has immediate access to their funds. Depending on the funding source, different documents will be required. Examples of an acceptable bank letter and statement are included at the end of this packet.

Source of Funding	Documents Needed
<p><b>Personal Funds:</b> Readily available money in a bank account in your name</p>	<ol style="list-style-type: none"> <li>1. Your bank letter or bank statement, no more than 30 days old that includes: <ul style="list-style-type: none"> <li>• Your Name</li> <li>• Current Balance</li> <li>• Date</li> <li>• Be stamped or signed by a bank representative</li> <li>• For letters: clearly state there are no restrictions and funds are readily accessible</li> </ul> </li> <li>2. If the current balance is not in USD, you will need to provide a <a href="#">currency conversion</a> with your bank information</li> </ol>
<p><b>Family Funds:</b> Readily available money in your parent(s), family member, and/or friend(s) bank account(s).</p>	<ol style="list-style-type: none"> <li>1. Your sponsor's bank letter or bank statement, no more than 30 days old that includes: <ul style="list-style-type: none"> <li>• The account holder's name</li> <li>• Current Balance</li> <li>• Date</li> <li>• Be stamped or signed by a bank representative</li> <li>• For letters: clearly state there are no restrictions and funds are readily accessible</li> </ul> </li> <li>2. If the current balance is not is USD, you will need to provide a <a href="#">currency conversion</a> along with the bank information</li> <li>3. Affidavit of Support signed by your sponsor(s)</li> </ol>
<p><b>Other Funds:</b> Money available from sources other than family.</p>	<ol style="list-style-type: none"> <li>1. An official approval letter that includes: <ul style="list-style-type: none"> <li>• Name of Sponsor</li> <li>• The amount of the approved funding</li> <li>• The time period for which your funds are guaranteed</li> </ul> </li> <li>2. If the approval letter is not in USD, you will need to provide a <a href="#">currency conversion</a> along with the letter.</li> </ol>
<p><b>NECO Funding:</b> If you are receiving a scholarship, award or grant from NECO.</p>	<p>A letter from the Financial Aid Office confirming your award and the award amount.</p>

**Documents that are not accepted as a source of funding** – There may be some unacceptable documents not listed; however these are the most common:

- Investment accounts/portfolios
- Retirement accounts
- Rental Income
- Real Estate Property
- Cryptocurrency
- Funds not immediately accessible or have restrictions
- Life Insurance polices
- Tax return forms or documents

**Government Loans:** If you are using student loans as a source of funding, NECO will only accept approved loans. We do not accept pending loan applications or conditionally approved loans.

Table of Estimated Minimum Expenses in U.S. Dollars for the 2026-2027 Academic Year

	Four-Year OD	MS Program
Tuition	\$51,596	\$24,926
Fees and Equipment	\$2,311	\$675
Health Insurance	\$3,512	\$3,512
Living Allowance	\$24,680	\$24,680
<b>TOTAL AMOUNT</b>	<b>\$82,099</b>	<b>\$53,793</b>

Please Note:

1. Students should expect a 2-4% increase every year.
2. MS Program tuition, fees and health insurance are not final, last year’s rate is listed and will change.
3. Health Insurance covers the student only and is required by the Commonwealth of Massachusetts. Health Insurance rates are not final for the 26-27 Academic Year. Last year’s rate is listed and will change.
4. If you are bringing a dependent, add \$9,120.00 to the single column figures for the first individual for living expenses. Add \$4,000.00 for each additional dependent for living expenses.

Once all documents have been submitted, they will be reviewed by the Registrar’s Office after the deadline. You will be contacted if we need further information. Once approved, an I-20 form will be emailed to you.

It is your responsibility to make sure that everything on your I-20 matches the information on your passport. Please contact the Registrar’s Office if there are any discrepancies.

## Visa Transfer Information

If you are currently enrolled at a school in the U.S., in active F-1 visa status, and your current program end date is less than five months before starting NECO, your current school should transfer your active SEVIS record to NECO. The international student advisor at your current school will determine a "release date" for your record for when they will go into SEVIS and release your SEVIS record to NECO. On the release date, we can then access your SEVIS record to create your new I-20.

New England College of Optometry's SEVIS code is BOS214F002233000

In addition to your current school releasing your SEVIS record, you will need to complete the Foreign Citizenship Form for I-20 Issuance and Financial Certification Forms as well as provide the following documents:

- A copy of your current I-20
- Your most recent I-94 Arrival/Departure Record
- A copy of your passport photo page
- A copy of your current F-1 Visa (if applicable)

Please note: You may stay in the U.S. if the above SEVIS record transfer procedures are followed. However, if the period between programs **is longer than five months**, NECO must issue you a new initial I-20 with a new SEVIS number. You will need to leave the U.S. within your 60-day grace period and re-enter no earlier than 30 days between your new program start date. You will also have to pay the I-901 SEVIS Fee again.

## Questions?

If you have any questions, please contact the Registrar's Office at:

- Email: [registrar@neco.edu](mailto:registrar@neco.edu)
- Phone: 617-587-5581

We are looking forward to seeing you at NECO!!

### STUDENT INFORMATION

FULL NAME:

FAMILY (Last/Surname)

GIVEN (First)

MIDDLE

Country of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Country of Citizenship: \_\_\_\_\_

Sex: \_\_\_\_ Male \_\_\_\_ Female

Country of Passport being Used: \_\_\_\_\_

Permanent Resident of (if applicable): \_\_\_\_\_

Permanent Address (Must be a non-U.S. address):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Please check which program you have been admitted to:**

Four Year Doctor of Optometry Program

MS/OD China Program

Accelerated Doctor of Optometry Program

Master of Science in Vision Science

Advanced Standing International Program

Other Program: \_\_\_\_\_

Will you be transferring your F-1 Visa from another school?

Yes  No

Name of School: \_\_\_\_\_

For students bringing dependents, please provide the following information on each dependent, and include their passport photo page with this form.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship to you:  Spouse  Child under 21 years old

Relationship to you:  Spouse  Child under 21 years old

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship to you:  Spouse  Child under 21 years old

Relationship to you:  Spouse  Child under 21 years old

I certify that the information supplied by me is true, correct and complete. I understand that misrepresentation of any kind may revoke my admission to the College.

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

### SOURCES OF FUNDING

Certification of funding is required by the Student and Exchange Visitor Program (SEVP) before an I-20 form can be sent to you. NECO requires proof of funding for one academic year for the issuance of an I-20. Please refer to the *I-20 Guide for Accepted Students* that accompanied this form for information about the total amount of funds needed as well as explanations of documents needed. Please keep the original copies of all financial documents submitted as you will need them to obtain your visa (if required) and to enter the United States for the first time as an F-1 Student.

**FULL NAME:**

\_\_\_\_\_

FAMILY (Last/Surname)

\_\_\_\_\_

GIVEN (First)

\_\_\_\_\_

MIDDLE

PERSONAL FUNDS	
Name of Bank	U.S. Dollar Amount

FAMILY FUNDS			
Name(s) on Account	Relationship to You	Name of Bank	U.S. Dollar Amount

OTHER FUNDS		
Name of Individual or Organization	Address of Individual or Organization	U.S. Dollar Amount

NECO FUNDING	
Type of Funding	U.S. Dollar Amount

TOTAL AMOUNT OF FUNDS AVAILABEL FOR ONE YEAR IN U.S. DOLLARS:      \$ \_\_\_\_\_

I certify that the information supplied by me is true, correct and complete. I understand that misrepresentation of any kind may revoke my admission to the College.

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

Print Full Name: \_\_\_\_\_

**Support Letter**

New England College of Optometry  
424 Beacon Street  
Boston, MA 02115

To whom it may concern,

I hereby certify that I am willing, able and committed to support \_\_\_\_\_  
(Student's full legal name)

in the amount of \$\_\_\_\_\_ USD for study at New England College of Optometry. I have also provided documentation that these funds are available and can be transferred to the U.S. without restrictions. If you require any further confirmation or evidence, please do not hesitate to contact me.

Sponsor's Name (please print) \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Sponsor's Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sponsor's Signature \_\_\_\_\_ Date : \_\_\_\_\_  
mm/dd/yyyy

**Note:** Sponsor name must match the name on certifying financial document (bank statement, bank letter, etc.)

**To be completed by student:**

"I certify that the above information and all signatures are complete, accurate, and true; and that the stated funds are available for my educational and personal expenses."

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_  
mm/dd/yyyy

# Bank Letter Example

YourBank Ltd  
16 High Street Anytown Anyshire YZ99 1XY  
Tel: +44 (1) 20 5555 5555  
www.yourbankltd.uk



Re: [YOUR NAME]  
Date: February 21, 2019

This is to certify that [YOUR NAME/SPONSOR] maintains a [ACCOUNT TYPE] account with YourBank Ltd since [DATE ACCOUNT OPENED] with the account number: [ACCOUNT NUMBER].

The balance as on [TODAY'S DATE] is XXXXXX.XX [CURRENCY].

Please note that the account is free of any encumbrance and the customer has complete and immediate access to his or her funds.

Yours Sincerely,

YOURBANK Ltd.

A handwritten signature in black ink, appearing to read "Signature", is placed over a light grey rectangular background.

\_\_\_\_ AUTHORIZED SIGNATORY



A handwritten signature in black ink, appearing to read "Signature", is placed over a light grey rectangular background.

# Bank Statement Example

# Your Bank

16 High Street. Anytown, Anyshire YZ99 1XY

Mr John Smith  
5 Any Road  
Randomford  
Anyshire  
YZ985XY

Account name: Mr John Smith  
Account Type: Checking  
Account number: 99988877

Your current account statement:  
1 February to 1 March, 2019

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## Your account summary

Balance at 1 February: £40,000.00

Total money in: £5,474.00

Total money out: £1,395.17

**Balance at 1 March: £44,079.83**

Date	Description	Money out	Money In	Balance
	<b>Balance brought forward</b>			40,000.00
1 February	Card payment - High St Petrol Station	24.50		39,975.50
	Direct debit - Green Mobile Phone Bill	20.00		39,955.50
3 February	Cash Withdrawal - YourBank, Anytown High Street, timed 17:30 31 Jan	30.00		39,925.50
4 February	YourJob BiWeekly Payment		2,575.00	42,500.50
11 February	Direct Deposit - YourBank, Anytown High Street, timed 17:30 31 Jan		300.00	42,800.50
16 February	Cash Withdrawal - RandomBank, Randomford, timed 9.52 14 Feb	50.00		42,750.50
17 February	Card payment - High St Petrol Station	40.00		42,710.50
	Direct Debit - Home Insurance	78.34		42,632.16
18 February	YourJob BiWeekly Payment		2,575.00	45,207.16
18 February	Randomford's Deli	15.00		45,195.16
24 February	Anytown's Jewelers	150.00		45,042.16
	Direct Deposit		25.00	<b>45,067.16</b>
28 February	Monthly Apartment Rent	987.33		44,079.83
				<b>£44,079.83</b>

Signature

