

The Bridges Initiative

ブリッジズ・イニシアチブ

支援宣誓書および財務諸表 ブリッジ・イニシアチブ 重要なコンフィデンシャル情報

留学生は、本学で学ぶ各年度の年間資金を証明する書類を提出しなければなりません。この書類は、入学を検討するためにできるだけ早く返送してください。入学のために必要です。ビザ発給に使用される I-20 は、本学への入学が許可され、本書式に十分な記入がなされ返送されるまでは発給されません。すべての質問に をすべて記入してください。回答漏れがある場合、本学への入学が遅れたり、入学を拒否されることがあります。この用紙は 署名した日から | 年間有効です。署名された用紙のみ受理されます。

オースティン・ピー州立大学の平均費用は以下のように見積もられている: 9ヶ月(2学期制)

授業料と諸費用:\$14,219

ブリッジ・イニシアチブ資金:-(\$5,064)

(授業料の州内レベルへの引き下げ)

生活費:\$12,880

書籍:\$1,000

健康保険:\$1,546 その他:\$1,000

費用合計:\$25,581

*料金は予告なく変更される場合があります。これらの料金はキャンパス内の居住に基づくものです。www.apsu.edu/housing、キャンパス内の学生寮の料金をご確認ください。学費を計算する際、学生ビザ(F-I)の学生はキャンパス外での就労が認められていないことを忘れないようにしましょう。従って、申請者は、学業期間中のパートタイム、または夏季のフルタイムの雇用を、重要な支援手段として考えてはいけません。

米国領事館に十分な資金があることを証明するために、この書類が必要になる場合があります。このため、すべての書類のコピーを取っておくことをお勧めします。

APPLICANT'S NAME:						
申込者名	Last/Family Name	姓	First	名	Middle	
Country of Birth:		Countr	y of Citizensh	ip:		
出:	生国		•		国籍	
City of Birth:		Countr	y of Legal Per	rmanent	Residence:	
出生	都市		_		居住国	国

財政支援情報 FINANCIAL SUPPORT INFORMATION

財政支援源	金額(米ドル)
Sources of Financial Support	Amount in U.S. Dollars
Name of Person: 支援者名 Name of Bank: 財務内容を確認できる銀行名 (A bank official's notarized signature below and an attached certification letter are required if the student is supported in part or whole by personal family savings.) The signature of a family member is required below.	\$

学生の一部または全部を家族の貯蓄で賄う場合は、署名 と捺印を含む正式な書類が必要です。以下に支援者名が 必要です。

THE SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS. 以下は、すべての申請者が記入する必要があります

BANK OFFICIAL AND SPONSOR'S CERTIFICATION OF SOURCES OF FUNDS

(Bank official's signature and stamp/seal **AND** bank statement/or letter verifying funds **must** be submitted.) 銀行職員およびスポンサーの資金源証明書 (+分な資金があることを証明する銀行取引明細書への署名と捺印が必要である)

This is to certify that I have read the information given by the applicant on this form, that it is true and accurate, and that the funds NOTED are available and will be provided as specified:

これは、本書式に記載されたすべての情報が正確であり、資金が利用可能であり、指定された通りに提供できることを証明するものです
Parent's or sponsor's signature:

Date:

親または保護者のサイン	日付
Parent's or sponsor's name (PLEASE PRINT): 親または保護者の名前(ローマ字で印刷してください)	
Relationship of sponsor to the applicant: 保護者と申請者との関係	
Address of sponsor: 保護者の住所	
and that the funds are available and will be provid-	given by the applicant on this form, that it is true and accurate ed as specified: 利用可能であり、指定された通りに提供できることを証明するものです
Bank official's signature:	Date:
銀行職員のサイン	日付
Bank official's name (PLEASE PRINT): 銀行職員の名前(ローマ字で印刷してください)	
Name and address of bank: 銀行名と住所	
	, certify that the information I have provided is
	ditional financial assistance from Austin Peay State University.
· · · · · · · · · · · · · · · · · · ·	on changes before my enrollment, I must notify Austin Peay
State University immediately.	
提供した情報が正確かつ完全であり、Austin Peay State Universi の情報に変更があった場合、直ちにオースティン・ピ 一州立大学に	ty から追加の財政援助を必要としないことを証明します。さらに、入学前にこれら 「通知しなければならないことを理解します。
Applicant's Signature:	Date:

Austin Peay State University does not discriminate on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs and activities sponsored by APSU. http://www.apsu.edu/policy. Policy 6:003

February 2024

申込者名のサイン



Affidavit of Support and Financial Statement Bridge Initiative Important Confidential Information

International students must submit specific documentation of yearly funds available to cover each year of study at the University. THIS FORM MUST BE RETURNED AS SOON AS POSSIBLE TO BE CONSIDERED FOR ADMISSION. Form I-20, used for the issuance of a visa, cannot be issued to you until you have been admitted to the University and satisfactorily completed and returned this form. All questions must be answered in full. The omission of any answer may cause a delay in or denial of admission to the University. This form is valid for ONE YEAR ONLY from the date of signature. Only signed forms will be accepted.

Austin Peay State University's average cost is estimated as follows: Nine Months (Two Semesters):

Tuition and fees:	\$14,219
Bridge Program Funding:	- \$5,064
Living expenses:	\$12,880
Books:	\$1,000
Health insurance:	\$1,546
Misc. expenses:	\$1,000

Total: \$25,581

*All fees are subject to change without notice.

These fees are based on on-campus living. Please visit www.apsu.edu/housing to review the rates for the residence halls available on campus. When computing your expenses, remember that students holding a student (F-1) visa will not be authorized to work off campus. Therefore, applicants should not look to employment, either part-time during the academic year or full-time during the summer, as a significant means of support.

You may need this documentation to prove to the United States Consular Operations that you have sufficient funds. We suggest that you make copies of all documents for this purpose.

APPLICANT'S NAME: Last/Family Name	First	Middle
Country of Birth:	Country of Citizenship:	
City of Birth:	Country of Legal Permanent	Residence:
FINANCIAL SUF	PPORT INFORMATION	
Sources of Financial Support	Amount in	U.S. Dollars
Name of Person: Name of Bank: (A bank official's notarized signature below and an certification letter are required if the student is supp part or whole by personal family savings.) The signature of a family member is required below	attached ported in	

THE SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS.

BANK OFFICIAL AND SPONSOR'S CERTIFICATION OF SOURCES OF FUNDS

(Bank official's signature and stamp/seal AND bank statement/or letter verifying funds must be submitted.)

This is to certify that I have read the information given by the applicant on this form, that it is true and accurate, and that the funds NOTED are available and will be provided as specified:

Parent's or sponsor's signature:	Date:
Parent's or sponsor's name (PLEASE PRINT):	
Relationship of sponsor to the applicant:	
Address of sponsor:	
This is to certify that I have read the information giver and that the funds are available and will be provided as	n by the applicant on this form, that it is true and accurate specified:
Bank official's signature:	Date:
Bank official's name (PLEASE PRINT):	
Name and address of bank:	
	, certify that the information I have provided in al financial assistance from Austin Peay State University nanges before my enrollment, I must notify Austin Peager
Applicant's Signature:	Date:

Austin Peay State University does not discriminate on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs and activities sponsored by APSU. http://www.apsu.edu/policy.Policy6:003