

Statement of Financial Support (Out-going)

Date _____ Y _____ M _____ D _____

| | | | |
|------------------------------------|--|---------------------------|--|
| Student ID No. | | Name | |
| 1 st Choice Institution | | Preferred Exchange Period | <input type="checkbox"/> 1 Semester <input type="checkbox"/> 1 Year |

| | |
|---|---|
| (International Student) APU Tuition Reduction you are currently receiving | |
| | % |
| (Domestic/International Student) Type of other scholarships you are currently receiving | |

I, _____, understand that by submitting my application forms and Statement of Financial Support that I am under contract with APU to join the Student Exchange Program and that I cannot cancel my application for foreseeable reasons. Should I cancel my application for foreseeable reasons, I understand that I will be unable to re-apply for future APU Student Exchange Programs.

Signature (Applicant) _____

Date _____

FINANCIAL SPONSOR: (To be filled in and signed by the financial sponsor)

| | |
|-------------------------------|--|
| Name | |
| Relationship to the applicant | |
| Address | |
| Telephone Number | |

I, _____, hereby agree to become the financial sponsor of the above-mentioned applicant during his/her term as an exchange student as regards the items listed below. I also understand that I may be required to submit proof of my financial status for visa application purposes.

1. APU Tuition A and Tuition B
2. Insurance Fees: APU Overseas Travel Accident Insurance and J-TAS (Risk Management Support System) coverage (Fee will vary with the duration of the trip.)
3. Student visa fees, travel expenses, local living costs, other expenses.

Signature (Financial Sponsor) _____

Date _____