



# LYNN UNIVERSITY

3601 North Military Trail • Boca Raton, FL 33431 USA

## 2011 – 2012 FOREIGN STUDENT FINANCIAL STATEMENT: AVIATION CERTIFICATE

Lynn University requires a financial statement for the first year of study, from each applicant who is not a United States citizen or in possession of a permanent resident (immigrant) visa at the time of application for admission. This statement, and the required supporting financial documents, must be on file before an I-20 can be issued. Two original sets of supporting documents should be obtained. One set should be attached to the form and will become part of your permanent file. The other set should be used to present to the U.S. Embassy or Consulate. Photocopied, faxed and scanned documents are not acceptable forms of verification.

### SECTION I: APPLICANT INFORMATION

Applicant's family name: Mr./Ms.		Given name:
Country of birth:	Citizenship:	Date of birth: (Month/Day/Year)
Telephone:	Fax:	E-mail:
Mailing address:		

- Expected visa type:  F-1 Academic or Language Training  J-1 Exchange Visitor  
 Other (specify): \_\_\_\_\_  None needed (Attach documentation)

### SECTION II: DEPENDENT INFORMATION

- Will a spouse and/or child(ren) accompany you to Lynn University on your visa? Yes  No
- If so, you must add the following minimums to the total cost: **Spouse: add \$6,000. Each child: add \$3,000.**

Name (Family name, given name)	Date of birth (Month/Day/Year)	Country of birth	Relationship (Wife/Husband, Daughter/Son)

### SECTION III: SOURCE OF SUPPORT IN U.S. DOLLARS (documentation required see page 2)

- |   |                                |
|---|--------------------------------|
| Check all sponsors providing this funding:  | Amount of each type of support |
| <input type="checkbox"/> My own personal funds  | USD \$ _____                   |
| <input type="checkbox"/> Parents' and/or sponsor's funds (family, friend).<br>Person and relationship to you: _____ | USD \$ _____                   |
| <input type="checkbox"/> Home government funds. Agency name: _____  | USD \$ _____                   |
| <input type="checkbox"/> University award. Department name: _____   | USD \$ _____                   |
| <input type="checkbox"/> Other. Please specify: _____   | USD \$ _____                   |

**ALL APPLICANTS MUST SHOW PROOF OF FINANCES**

Please obtain an official letter from the bank or financial institution in which you, and /or your sponsor, have available funds. This letter should be written on the bank or financial institution’s official letterhead, in English, and must be signed by a bank official. This letter should state the date the account was opened, the currency type, and specifically state an amount that is currently in the account. Bank letters dated more than two months from the date of submission to Lynn University are considered expired. If dependents will accompany you, please add the additional costs of your dependents.

**PARENTS OR SPONSORS MUST ALSO PROVIDE A LETTER OF COMMITMENT**

This letter must include your full name, the relationship between you and the sponsor, the amount and duration of his/her support, and the sponsor’s original signature. The sponsor must include his/her telephone number and address.

**ORGANIZATIONS (GOVERNMENT OR PRIVATE) SPONSORING**

You must provide a letter of sponsorship on the organization’s official letterhead with their address, telephone and fax number, and the original signature and title of the responsible official. This letter should also include your full name, the specific dollar amount, and duration of their sponsorship.

**CERTIFICATION**

This certifies that the total amount of money that I have available for my first year of study at Lynn University (including funds for dependents if applicable) is USD\$\_\_\_\_\_, and the total amount available for each subsequent year of study is USD\$\_\_\_\_\_. I understand that I must provide documentation for the total amount below for my program of study. All documents are attached to this form. Further, I certify that the above information provided is correct and complete.

Signature of student \_\_\_\_\_

Date \_\_\_\_\_

**SECTION IV. 2011-2012 ESTIMATED PROGRAM COSTS FOR AVIATION CERTIFICATE**

**Professional Commercial Pilot Certificate Program**

Academic year: **12 months**

Tuition and fees	\$50,400
Housing	\$12,000
Books and supplies	\$1,200
Health insurance	\$1,020
<b>Total</b>	<b>\$64,620</b>

**PAYMENT**

You must be prepared to pay one term’s tuition and fees in full at registration, including your housing if you plan to live on campus. The figures above represent minimal costs of living on campus. Your personal experience may differ significantly. All the dollar amounts are subject to change without notice.

**WIRE PAYMENTS**

Funds received via wire transfer must be for the amount due on the student account. Any payment that exceeds the amount due will be credited to a future semester to cover any anticipated tuition and related fees. If a refund is requested by the family, it will be refunded only to the issuing party using the same wire instructions as the original receipt of disbursement.

**SECTION V. ADDITIONAL CONTACT INFORMATION**

If you have a U.S. contact and address available to release your I-20 to or request additional documentation, please print the name, telephone and address below. You must also sign the release below

Name of contact: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

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

Address \_\_\_\_\_

I certify that I desire to have the above-named person contacted in the event additional information is needed or to receive my I-20 document.

Signature of student \_\_\_\_\_

Date \_\_\_\_\_