

FINANCIAL SUPPORT INFORMATION

Sources of Financial Support	Amount in U.S. Dollars
1. Personal and/or Family Savings Name of Person: _____ Name of Bank: _____ (A bank official's notarized signature below and an attached letter of certification is required if the student is supported in part or in whole by personal family savings.) Signature of family member is required below.	\$
2. Government Sponsor (Print name of agency) _____ (Enclose signed copy of letter certifying sponsorship)	\$
3. Sponsor Print name of each person: 1. _____ 2. _____ 3. _____ (Signature is required below)	\$
Austin Peay State University Award Name of Award: _____	\$
Other (specify below and enclose a signed affidavit of support from the authorized person to certify accuracy) _____ _____	\$
TOTALS Each of these totals should equal or exceed the estimate on the first page of the costs.	\$

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 applicant: _____

Address of sponsor: _____

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 are available and will be provided as specified:

Bank official's signature: _____ Date: _____

Bank official's name (PLEASE PRINT): _____

Name and address of bank: _____

I, (print name) _____, certify the information I have provided is correct and complete and that I shall not require additional financial assistance from Austin Peay State University. I further understand that if any of this information changes prior to my enrollment, I must notify Austin Peay State University immediately.

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**