

English Language Institute

As an international student, you must show that you have financial resources available for all educational and living expenses to support your studies Austin Peay State University. This form is mandatory for admission.

Your form I-20, which you will use to apply for a visa, will not be issued until you are admitted. This form is valid for **one** year from date of signature. Unsigned forms will not be accepted.

APPLICANT'S NAME:					
	Last/Family	Name	First	Middle	
Country of Birth:		Country o	f Citizenship:		
City of Birth:					
If you are in the U.S.A.: What	at is your visa	type?:			
For the 2025-2026 academic	year, the estir	nated costs per	term are:		
All costs are subject to change.	1 Term	2 Terms	3 Terms	4 Terms	5 Terms
	(8 weeks)	(16 weeks)	(6 months)	(8 months)	(1 year)
Tuition and book rental	\$2,239	\$4,478	\$6,717	\$8,956	\$11,195
Miscellaneous and	\$944	\$1,887	\$2,831	\$3,774	\$4,718
Insurance					
Living expenses	\$3,242	\$6,483	\$9,725	\$12,966	\$15,966
TOTAL	\$6,425	\$12,848	\$19,273	\$25,696	\$31,879

If you are a married student and plan to bring your spouse and children, additional funds for your spouse and for each child must be available per term for living expenses. This does not include health insurance.

	1 Term	2 Terms	3 Terms	4 Terms	5 Terms
	(8 weeks)	(16 weeks)	(6 months)	(8 months)	(1 year)
Spouse	\$1,250	\$2,500	\$3,750	\$5,000	\$6,250
Per child	\$875	\$1,750	\$2,625	\$3,500	\$4,375

Updated: July 2025

A. I am applying to study for a total of	_ terms (each term is eight (8) weeks)
The time on your I-20 form will be base	ed on the number of terms you list here. It can
be extended if needed once you begin study	·.

B. Please indicate personal plan: \Box I plan to come alone. \Box My dependents will join me. Submit a copy of the passport information page for each dependent.

Full Name: Date of Birth (mm/dd/yyyy): Country/City of Birth:	Relationship: City of Birth: Country of Citizenship:	
Full Name: Date of Birth (mm/dd/yyyy): Country/Cioty of Birth:	Relationship: City of Birth: Country of Citizenship:	
Full Name: Date of Birth (mm/dd/yyyy): Country/City of Birth:	Relationship: City of Birth: Country of Citizenship:	
C. Sources of Support – write the amount for whatever source of support you will have. Include a document showing balance. Must be dated within twelve (12) months	Amount ths.	Example for 5 terms
1. Personal savings		\$3,200
2. Family member: Name: Bank: (Send bank statement or letter signed by a bank official)	-	\$28,000
3. Sponsor or Government Agency: 1. 2. 3		
4. Other Specify and submit additional documentation:		
Note: The total should equal or exceed the estimated	MS	\$31,200

Official certificates of sources of funds and amounts

Student name:	
1. Family member/sponsor (if listed	l on page 2, part C)
This is to certify that I have read	the information on this form, that it is true and accurate
	guarantee to provide sufficient funds (US
	amount)) to cover expenses while the student is
studying at Austin Peay State Un	iversity.
Signature	Date
Name	
Relationship to student	
Address	
Signature	Date
Name	
Relationship to student	
Address	
2. Student	
I (print name)	, certify that the total amount of money I
have available for my study at Au	ustin Peay State University (including spouse and
children, if applicable) is US \$	(enter total amount). I also certify that
the information on this form is co	orrect and complete, and I shall notify the EL Institute
of any changes.	
Student signature	
Date	

Please keep a copy of this form and all supporting documents (such as bank letter, bank account statement, sponsor letter, etc.) before sending it to APSU. You will need these items when applying for your visa and entering the U.S.