

SAMPLE (記載例)

VALENCIA COLLEGE

International College Program DS 2019 Request Form

Applicant Information: Please print your name as it appears on your passport in all capital letters.

Family/Last Name: SEIKYO 1102 和 十 と 同い First HANAKO
 Middle Name: _____ Telephone: +81-90-9189-0536
 Gender: Male Female Date of Birth (MM/DD/YYYY): 03/28/1997
 Country of Birth: Japan City of Birth: Osaka 大阪府の県名
 Country of Citizenship: Japan Email Address: hanako-s0123@yahoo.co.jp

Foreign Address

Address Line 1: 13-16 Yodogawa-ku
 Address Line 2: _____
 Address Line 3: _____
 City: Osaka
 State/Province: Osaka
 Postal Code: 532-0011
 Country: Japan

U.S. Address (if available):

Address Line 1: _____
 Address Line 2: _____
 Address Line 3: _____
 City: _____
 State/Province: _____
 Zip Code: _____
 Country: _____

↑ 了りての数字を
明確に記入する。
随時、正確に記入する
+14 PF 62

Educational Information:

Graduated from High School? Yes No Date of High School Graduation 03/31/2015
 Have you ever attended Valencia? Yes No Dates attended: from _____ to _____
 Current University/College/Institute Seikyo Gakuin University
 Career/major course of study English Dates attended: from _____ to current

Emergency Contact:

Name: Seikyo Taro Relationship: Father
 Phone (including country and city code): +81-6-6991-8252
 Email Address: taro0728@gmail.com

I certify that all information on this application is true. I agree to abide by all Valencia College rules and regulations. I agree to pay Valencia's tuition and fees and any reasonable collection costs if applicable.

Student Signature: 生協花子 Date _____

SAMPLE (記載例)

VALENCIA COLLEGE

International College Program Verification of Academic Standing Form

Please print and fill in the first section of this form. This form is to be filled out by a professor or school official who is able to comment on your academic standing and program of study.

Part 1: To be completed by student.

Date (mm/dd/yyyy): _____ ← 記入日

Student's Name: Manako Seikyo

Current Institution: Seikyo Gakuin University

Major: English

Date of Degree Completion: 03/31/2019

(mm/dd/yyyy)

Are you a full-time student? Yes No

Part 2: To be complete by professor or school official. Please share any additional information about the student (if applicable).

教員または職員記入欄 (任意)

* 案内では (任意) となっているが、原則、指導教員に推薦コメントの記載を依頼して下さい。

As a representative of the above institution, I attest that the student mentioned on this form is in good academic standing and their course of study directly relates to Valencia's J Exchange Visitor Program titled "Valencia's International College Program with Academic Training at the Walt Disney World Resort."

School Official's Name : Seikyo Gakuin University School Official's Title/Department: International Program Manager

Official's Phone Number: +81-6-4806-8971 Official's Email: international@seikyo-u.ac.jp

日本語・英語どちらでも可

School Official's Signature: _____ ↓

Date (mm/dd/yyyy): _____ ↓ 記入日

International College Program

Essay Question

Below please write a short paragraph explaining why you want to participate in Valencia's Exchange Visitor Program and how it relates to your course of study. Please print clearly.

別紙「記入上の注意」をよく読み記入して下さい

International College Program

Declaration of Finances/Affidavit of Financial Support

This confidential financial certification form MUST be completed before the DS-2019 will be issued. Supporting financial documents can be no more than 30 days old from the date of application or reapplication. If you have any questions about completing this form, please see your school contact.

Description	Fees
Application fee	\$50
Tuition fee (full-time enrollment—12 credit hours)	\$2450
Accident and Sickness Insurance, 6 months (mandatory)	\$652.50
Living expenses for 2 weeks before first WDW pay(food, transportation, etc.)	\$400
Total Financial Requirement	\$3,552.50

Financial Support in U.S. Dollars:

NOTE: No investment or credit card accounts will be considered.

1. Personal Checking and/or Savings Amount:

\$ 0 ← 本人口座あり (①の場合)

2. Sponsor(s) Funds Amount:

\$ 4,600 ← 財高証明の額を記載 (②の場合)

Print Sponsor(s) Name: Taro Seikyo

Sponsor(s) Address: 13-16 Yodogawa-ku,
Osaka City, Osaka, Japan

↑
← 保護者口座の場合 (①)
*②の場合には本人の氏名・住所を記載し、金額はゼロとする

3. J-1 Student's Government/Other Organizational Sponsorship Funds Amount:

\$ _____

Print Name of Agency: _____

TOTAL: \$ 4,600

AFFIDAVIT OF FINANCIAL SUPPORT

The affidavit below must be completed by the family member or sponsor and must match the name of the account holder provided in the bank letter or statement. Students do not need to complete this section if all financial support comes from personal funds.

Subject: Funding for Hanako Seikyo

(Name of Student)

Please note that I, Taro Seikyo do hereby affirm that I will provide financial support for the participant

(Sponsor Name) ②の場合には本人の氏名

↑ \$3700以上を記入

listed above from _____ through _____ in the amount of \$3,700

(Program Start Date)

(Program End Date)

(U.S. Dollars)

These funds will pay for the fees described in the Certification of Finances Form. Enclosed is a bank letter or bank statement from my financial institution.

Signature of Sponsor: 生協太郎

Date Signed: _____

↑
記入日

