

INTERNATIONAL STUDENT APPLICATION



Please Print or Type

Last Name: (Family Name) _____

First Name: (Given Name) _____

Permanent Foreign Mailing Address: _____

Email Address: _____

Foreign Phone Numbers

Home Telephone: _____ Work Telephone: _____ Cell Phone: _____

United States Mailing Address (If Applicable)

Address-Street: _____ Apt#: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home Telephone: _____ Work Telephone: _____ Cell Phone: _____

Date of Birth: _____ Country of Birth: _____

Country of Citizenship: _____ Native Language: _____

Proof of graduation from a U.S. equivalent High School is required before beginning class.
Please provide an original copy of your official academic records with the following:

- Certified English Translation
- Certified verification of U.S. High School equivalency

School Name: _____ Country: _____

Address: _____

Date Attended: _____ Date of Graduation: _____

Degree Earned: _____

Estimated Expense for Arizona Culinary Institute

The following is the appropriate cost of 9 months of study at ACI

Diploma In Culinary Arts, Baking and Restaurant Management

Tuition	\$ 25,990
Books/Supplies	\$ 1,805
Living Expense (Off Campus)	\$ 10,000
Total Financial Guarantee Required	\$ 37,795



Financial Guarantee Statement (to be completed by the applicant/sponsor)

I certify that the minimum funds listed above are available to me from the following sources.

Check the options that apply and obtain the appropriate signatures.

Personal Savings. Note: the Bank certification section below must be completed by a bank official.

Private Sponsor. I am willing and able to guarantee the financial support of the applicant according to the amounts stated above for the duration of his/her university studies. I am not a non-immigrant in the United States.

Note: The Bank certification section below must be completed by a bank official.

Sponsor's Signature: _____

Printed Name: _____ Date: _____

Printed Address: _____

Relationship to Applicant: _____

Bank Certification (to be completed by the Bank)

This is to certify that the minimum funds (as indicated above) are on deposit in this bank/financial institution in the name (please check one)

The Applicant

The Sponsor

Name of Bank: (printed) _____

Address: (of the Bank) _____

Signature of Bank Official: _____

Title: _____ Date: _____

Affix Original Bank Seal/Original Stamp Here

Applicant Statement (Must be signed and dated by the applicant. Applicants under the age of 18 must have the signature of a parent or legal guardian.)

I certify that the names, dates and other information that I provided on this international student application are true, correct and complete. I understand attendance does not guarantee full admission to the university.



Signature: _____ Date: _____