AMBS
Anabaptist Mennonite Biblical Seminary

Certification of funds

For international applicants

Applicant name _____
First Middle (Maiden) Surname

Address _____
Street, Box number or Rural Route City State/Province Zip/Postal Code Country

Telephone _____ E-mail address _____

In order for AMBS to issue the proper student visa papers, your total financial program — in addition to financial aid from AMBS — must be documented. In U.S. dollars, list the maximum amount that can be provided from each source: personal, family and sponsors. Do NOT include the expected financial aid and/or scholarship that you might receive from AMBS.

(Amounts in U.S. $)

Source of funds	Support	Projected support		Attach all documents according to your plan
	1st year	2nd year	3rd year	
Personal/family savings				Official/certified statement from your bank, which certifies the amounts listed in this section
Annual income Self: _____ Occupation: _____ Spouse: _____ Occupation: _____				Official/certified salary statement from the employer(s)
Sponsor name and occupation Name: _____ Occupation: _____ Relationship: _____ Name: _____ Occupation: _____ Relationship: _____				• Official/certified bank statement of your sponsor(s) making payments • Sponsorship letter(s) from your sponsor(s) stating the amount of support he/she is willing to contribute toward your study
Church or organization support Name: _____				Official letter on letterhead that states the amount of support that will be contributed to your support
Total amounts (in U.S. $)	$	$	$	

List the amount of money you will bring when you arrive at AMBS: U.S. $ _____

Financial agreement
I declare that the information on this form is true, accurate and complete and that each party understands its obligation. I also certify that the funds are available and will be provided in a timely manner.

_____ _____
Signature of applicant Date

Anabaptist Mennonite Biblical Seminary • Admissions and Financial Aid
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800.964.2627 ext. 227 or 574.296.6227 • Fax: 574.295.0092