



The State University  
of New York



# How to Apply

SUNY

Show All Campuses

- University Centers and Doctoral Degree Granting Institutions
- University Colleges
- Technology Colleges
- Community Colleges

\* Empire State College has 35 locations throughout New York State.

Industrial & Labor Relations  
Veterinary Medicine

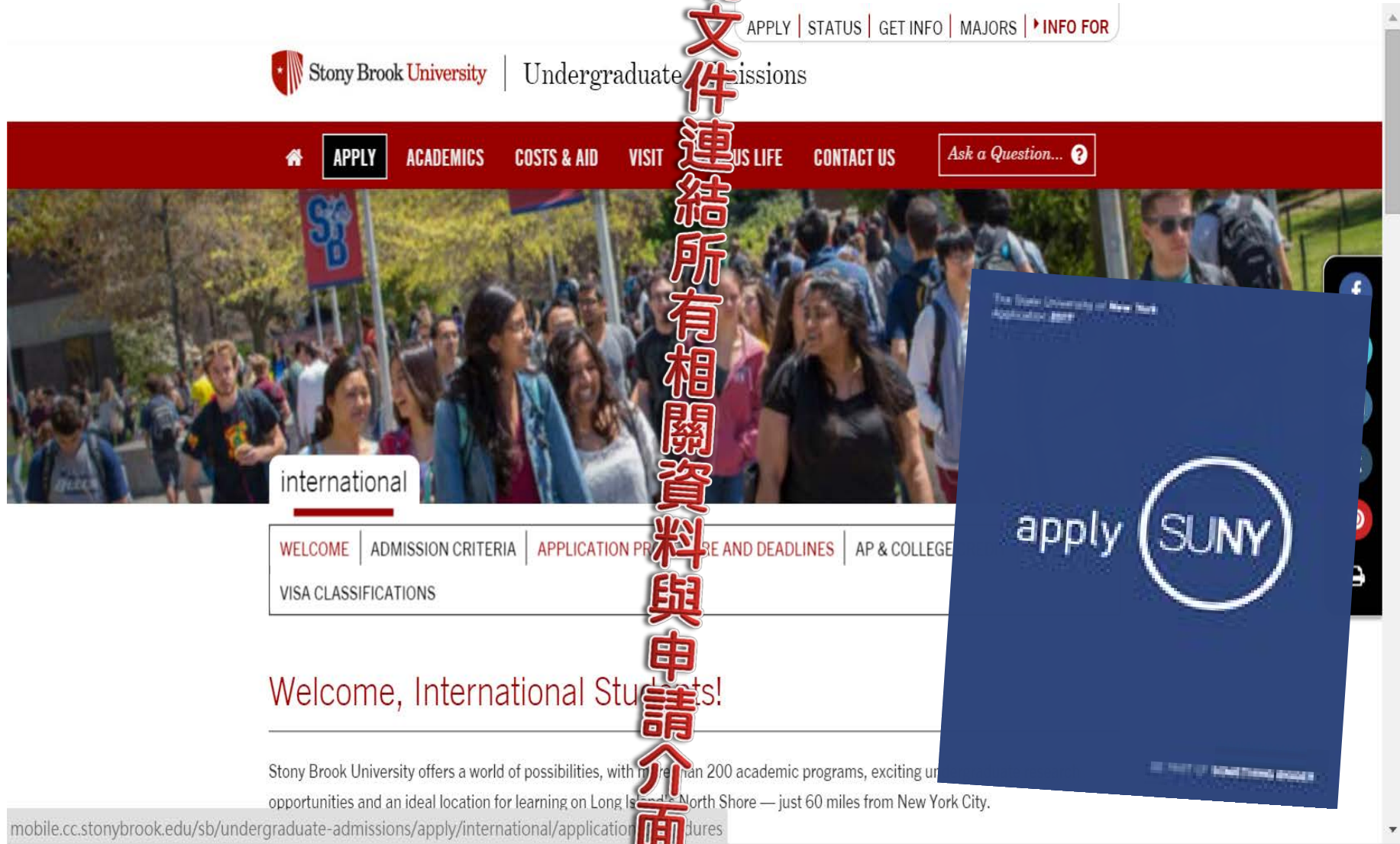


# How to apply

認識石溪

<http://mobile.cc.stonybrook.edu/sb/undergraduate-admissions/apply/international/>

一份說明文件連結所有相關資料與申請介面



Stony Brook University | Undergraduate Admissions

APPLY | STATUS | GET INFO | MAJORS | INFO FOR

APPLY ACADEMICS COSTS & AID VISIT CAMPUS LIFE CONTACT US Ask a Question...

international

WELCOME | ADMISSION CRITERIA | APPLICATION PROCEDURES AND DEADLINES | AP & COLLEGE CREDIT | VISA CLASSIFICATIONS

Welcome, International Students!

Stony Brook University offers a world of possibilities, with more than 200 academic programs, exciting opportunities and an ideal location for learning on Long Island's North Shore — just 60 miles from New York City.

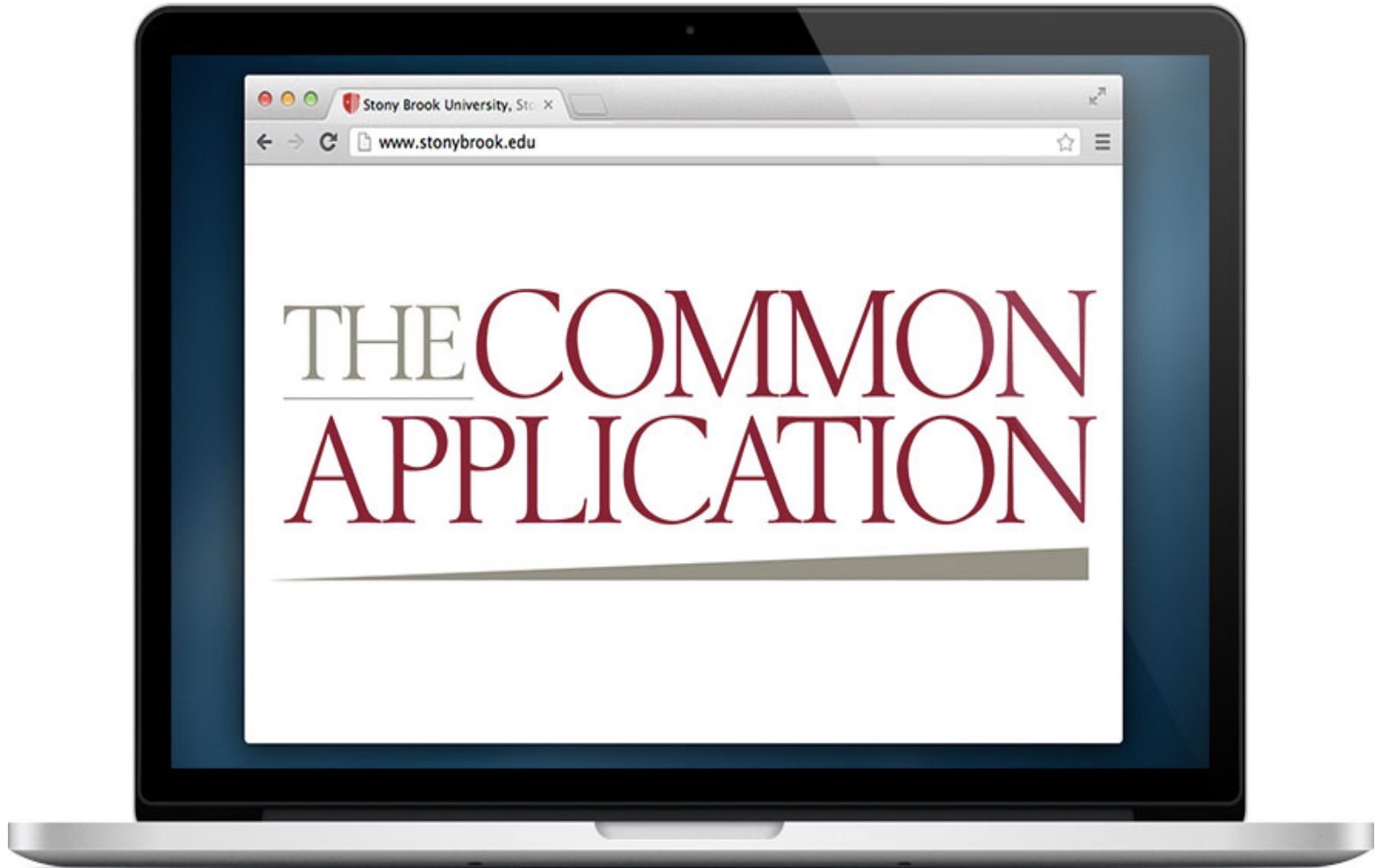
[mobile.cc.stonybrook.edu/sb/undergraduate-admissions/apply/international/application-procedures](http://mobile.cc.stonybrook.edu/sb/undergraduate-admissions/apply/international/application-procedures)

apply SUNY

The State University of New York

**There are two options to apply for admission as a freshman:**

**Option 1: The Common Application**



# 點選連結進入申請的畫面

## THE COMMON APPLICATION

[About Us](#)[Member Colleges](#)[Media Inquiries](#)[Application Resources](#)

### MISSION

The Common Application is a not-for-profit membership organization that, since its founding over 35 years ago, has been committed to providing reliable services that promote equity, access, and integrity in the college application process. We serve students, member institutions, and secondary schools by providing applications that students and school officials may submit to any of our over 500 members. Membership is open to colleges and universities that promote access by evaluating students using a holistic selection process.

### SEARCH FOR COLLEGES

### SIGN IN

Applicants

Members

Recommenders

Applicant Email Address

Password

[Forgot your Password?](#)


Sign In

HELP CENTER

Go

CREATE AN ACCOUNT

Go



建立新的帳號

## Option 2: The SUNY Application



# 點選連結進入申請的畫面

SUNY.edu

applySUNY

Get Help

Discover. Apply. SOAR.

Discover Opportunities

Find your campus & major before you begin.  
[Search for majors.](#)  
[View Campuses](#) that accept this application.

Apply for Admission

Complete and submit your undergraduate application or [complete worksheet](#) first.

Report your Academic Record (SOAR)

High school students: Submit your grades and test scores online.  
[Learn more.](#)

First time here?  
Get started

Already have an account?  
Log in

[Create your account now >>](#)

建立新的帳號

Email

Password

[Forgot password?](#)

Login

## 上線申請前請準備好下列資料

1. 個人護照資料及基本資料 (地址、聯絡mail、電話…)
2. Teacher/Counselor Evaluation (附件 1)
3. 小論文Essay **250字以內** (FSA-2 附件2)
4. 申請費用US\$50支付方式選擇 (如擬以信用卡支付，請先list出)

**建議：所有的資料都在SUNY所提供的  
申請空白表格worksheet先填寫好**

# 線上填完後續前請準備下列資料

1. 線上填寫資料列印出一份
2. School Counselor Form 成績單資料 (提供方式: 線上填入、校方填寫 Guidance Counselor Transmittal Form 傳真提供) (附件 1-1)
3. 托福成績
4. FSA-2 小論文 Personal Essay (附件 2)
5. FSA-3 英文能力證明 (附件 3)
6. FSA-4 財力證明 (附件 4)
7. Supplemental Application 補充資料 (附件 5)

# Priority Deadlines

Entry Term	Priority Deadline	Supporting Documents	Notification Schedule
Fall 2017	January 15	Mar 1	By April 1*

線上送出申請後會收到確認回覆的e-mail，於收到mail時  
可以在48小時內進入[applySUNY](#)做最後確認與修改

所有資料準備好後正式進入申請介面囉～共有六個步驟：  
開始→姓名與聯絡資料→申請人相關資訊  
→求學歷程→選擇校系→送出

## Portal Home

### SUNY Online Undergraduate Application

Applying to SUNY begins here. Select one of the following options to apply to participating campuses.

[Start my 2015 applySUNY Application](#)

Includes: Spring 2015, Summer 2015, Fall 2015

[Print applySUNY Application Worksheet](#)

[Print applySUNY Supplemental Application Worksheet](#)

[Print applySUNY Supplemental Application Worksheet](#)

Works

申請表填寫

### SUNY Online Academic Record

High School Students Only

線上填寫高中成績  
record to participating campuses.

[Start my SUNY Online Academic Record](#)

## Application Details

You currently do not have submitted applications.



# SUNY Undergraduate Application

Welcome Back, Shuying.

[Portal Home](#)

[Get Help](#)

[Change Password](#)

[Update Profile](#)

[Logout](#)

**Start**

[Profile](#)

[Personal Information](#)

[Academic History](#)

[Campus Selections](#)

[Submit](#)

## Education Plans (1 of 1)

Key: =Incomplete =Complete

### In This Section

#### 1. Education Plans

### Need Help?

CHAT

Live Help **Offline**

\* Will you be a Freshman or a Transfer Student?

- ☐ Freshman  
☐ Transfer

\* Are you applying for full-time or part-time study?

- ☐ Full-Time  
☐ Part-Time

Are you an Adult Learner?

- ☐ Yes  
☐ No

\* Are you applying for the Educational Opportunity Program (EOP)?

- ☐ Yes  
☐ No

The Educational Opportunity Program provides college access for students who are academically underprepared and cannot enter college under traditional admissions standards.

**Start**

[Start](#)[Profile](#)[Personal Information](#)[Academic History](#)[Campus Selections](#)[Submit](#)

## Profile (1 of 1)

# Profile

Full Legal Name:

United States Social Security Number:

Date of Birth:

09/15/1962

Gender:

Female

Permanent Address:

No 2 Hsinglung Road Sec. 4  
Taipei, 11649  
Taiwan

Home Phone Number:

886-002-29366803

Email Address:

thsh60@thsh.tp.edu.tw

[Edit Profile](#)[Save and Continue](#)

Key: =Incomplete =Complete

### In This Section

#### 1. Profile

### Need Help?

[CHAT](#)

Live Help **Offline**

### FAQs

There are no FAQs for this section.

[Profile](#)

## Undergraduate Application

Start

Profile

Personal Information

Academic History

Campus Selections

Submit

### Citizenship (1 of 6)

Key: =Incomplete =Complete

\* Are you a United States Citizen?

- ☐ Yes  
☒ No

\* Select your country of birth:

Select One

\* Select your country of citizenship:

Select One

- ☐ Yes  
☒ No

How many years have you been in the United States?

Provide the latest date that the Test of English as a Foreign Language (TOEFL) was or will be taken:

 mm/yyyy

#### In This Section

1. Citizenship
2. [Residency](#)
3. [Demographics](#)
4. [Additional Contact Information](#)
5. [Parent/Guardian Information](#)
6. [Alumni Information](#)

# Personal Information

CHAT

Live Help **Offline**

## Undergraduate Application

Start

Profile

Personal Information

Academic History

Campus Selections

Submit

### High School (1 of 2)

Key: =Incomplete =Complete

\*What is the name and address of your high school?

Add High School

\*Indicate your Secondary Education Status:

- ☐ I will graduate from high school
- ☐ I already graduated from high school
- ☐ I withdrew from high school
- ☐ I was home schooled
- ☐ I completed a New York State diploma
- ☐ I completed a GED in New York State or the New York City

\*Did you attend a New York State high school for two or more years?

- ☐ Yes
- ☐ No

What college credits have you received or do you expect to receive before you graduate from high school?

- ☐ Advanced Placement (AP)
- ☐ College Level Examination Program (CLEP)
- ☐ College course taught in high school
- ☐ Course taken at a college prior to graduation
- ☐ International Baccalaureate (IB)

#### In This Section

1. High School
2. [Standardized Test Dates](#)

#### Need Help?

Live Help Offline

#### FAQs

[I can't find my high school using the wizard.](#)

# Academic History

## Undergraduate Application

Start

Profile

Personal Information

Academic History

Campus Selections

Submit

### Campus Selections (1 of 1)

You have not selected any campus choices at this time.

Add a Campus Choice

Save and Continue

Key:  =Incomplete  =Complete

In This Section

1. Campus Selections

Need Help?

Live Help **Offline**

FAQs

[How do I know what major to select?](#)

[What is the Special Campus Project?](#)

# Campus Selection

Campus Selections

✓ Start

✓ Profile

✓ Personal Information

✓ Academic History

✓ Campus Selections

Submit

## Review Summary (1 of 5)



Your **Start** section has been successfully completed.



Your **Profile** section has been successfully completed.



Your **Personal Information** section has been successfully completed.



Your **Academic History** section has been successfully completed.



Your **Campus Selections** section has been successfully completed.

Continue

# Submit

Submit

# 線上填完後續前請準備下列資料

1. 線上填寫資料列印出一份
2. School Counselor Form 成績單資料 (提供方式: 線上填入、校方填寫 Guidance Counselor Transmittal Form 傳真提供) (附件 1-1)
3. 托福成績
4. FSA-2 小論文 Personal Essay (附件 2)
5. FSA-3 英文能力證明 (附件 3)
6. FSA-4 財力證明 (附件 4)
7. Supplemental Application 補充資料 (附件 5)

# (附件 1) 線上 Teacher Evaluation



## TEACHER EVALUATION FORM

**APPLICANT INSTRUCTIONS:** Please type or print in black ink. After completing all the relevant questions below and on the top of Page 2, give this form to a teacher who has taught you an academic subject (for example, English, foreign language, math, science, or social studies).

Please also give that teacher a stamped envelope addressed to: **Stony Brook University**  
UG Processing - Essay/Rec Ltrs  
279 Broadway  
Albany, NY 12204-2755  
USA

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_ Stony Brook ID # (if known): \_\_\_\_-\_\_\_\_-\_\_\_\_  
month / day / year (Optional)

Student's Full Legal Name: \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Female ☐ Male  
Last/Family Name (enter name exactly as it appears on official documents) First/Given Name Middle Name

Address: \_\_\_\_  
Number and Street Apartment # City or Town State/Province Country ZIP/POSTAL CODE

School you now attend: \_\_\_\_\_ CEEB/ACT Code: \_\_\_\_\_

**Important Privacy Notice:** Under the terms of the Family Educational Rights and Privacy Act (FERPA) you WILL have access to your recommendation after your matriculate UNLESS you waive your right to access below:

☐ Yes, I do waive my right to access, and I understand I will never see this recommendation.

☐ No, I do not waive my right to access and may someday choose to review this recommendation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TEACHER INSTRUCTIONS:** Stony Brook University finds candid evaluations helpful in choosing from among highly qualified candidates. A photocopy of another reference you may have prepared on behalf of this student is acceptable in lieu of page 2 of this form. Type or print in black ink and return this form to Stony Brook University's Office of Undergraduate Admissions in the envelope provided to you by this student. Please submit your reference promptly. **Be sure to sign below.**

Teacher's Name (Mr./Ms./Dr., etc.): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Secondary School: \_\_\_\_\_

School Address: \_\_\_\_  
Number and Street City or Town State/Province Country ZIP/POSTAL CODE

Teacher's phone (\_\_\_\_) \_\_\_\_\_ Teacher's e-mail: \_\_\_\_\_  
Area Code Number Ext.



## TEACHER EVALUATION FORM

Page 2

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_ Stony Brook ID # (if known): \_\_\_\_-\_\_\_\_-\_\_\_\_  
month / day / year (Optional)

Student's Full Legal Name: \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Female ☐ Male  
Last/Family Name (enter name exactly as it appears on official documents) First/Given Name Middle Name

### BACKGROUND INFORMATION

How long have you known this student and in what context?

What are the first words that come to your mind to describe this student:

List the courses you have taught this student, noting for each the student's year in school (10th, 11th, 12th; first-year, sophomore, etc.) and the level of course difficulty (AP, accelerated, honors, IB, elective; 100-level, 200-level, etc.).

**RATINGS:** Compared to other students in his or her class year, how do you rate this student in terms of:

No Basis	Below Average	Average	Good	Very Good	Excellent	Outstanding	Exceptional-Rare
Academic achievement:							
Intellectual promise							
Quality of writing							
Creative, original thought							
Productive class discussion							
Respect accorded by faculty							
Disciplined work habits							
Maturity							
Motivation							
Leadership							
Integrity							
Reaction to setbacks							
Concern for others							
Self-confidence							
Initiative, independence							
Overall							

**EVALUATION:** Please write whatever you think is important about this student, including a description of academic and personal characteristics, as demonstrated in your classroom. We welcome information that will help us to differentiate this student from others. Please feel free to provide additional comments on a separate sheet.

# (附件 1-1 學校端填寫成績證明 Guidance Counselor Transmittal Form)



**Stony Brook University**

## GUIDANCE COUNSELOR TRANSMITTAL FORM

Please fax all paper documents to: (631) 632-9898. If items cannot be faxed, please send them to:  
Note: Credentials faxed directly from the high school do not need to be mailed in hard copy.

Stony Brook University  
UG Processing  
279 Broadway  
Albany, NY 12204-2755

**APPLICANT INSTRUCTIONS:** Please type or print in black ink. After completing all the relevant questions below, ask your counselor to complete the Counselor Section, attach your transcript, and mail to the above address.

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_ (Optional) \_\_\_\_-\_\_\_\_-\_\_\_\_ Stony Brook ID # (if known): \_\_\_\_-\_\_\_\_-\_\_\_\_

Student's Full Legal Name: Last/Family Name (enter name exactly as it appears on official documents) \_\_\_\_/\_\_\_\_ First/Given Name \_\_\_\_/\_\_\_\_ Middle Name \_\_\_\_  
☐ Female ☐ Male

Address: \_\_\_\_  
Number and Street Apartment # City or Town State/Province Country ZIP/POSTAL CODE

Phone Number: \_\_\_\_ E-Mail Address: \_\_\_\_

I understand that my application cannot be processed if it has not been completed according to the instructions and any deliberate falsification or omission of data may result in denial of admission or dismissal. All information submitted is therefore true to the best of my knowledge. If I am an Early Action applicant, I agree to comply with the program requirements outlined in the Application Viewbook. With my signature, I authorize the release of my transcript(s) and standardized test scores to Stony Brook University for admission purposes.

Applicant's Signature: \_\_\_\_ Date: \_\_\_\_

**COUNSELOR SECTION:** Please complete one of the following statements (a or b) about this applicant's rank in class. If your school does not calculate or disclose exact rank in class, we would appreciate your estimating this student's rank as nearly as possible.

a. This applicant currently ranks \_\_\_\_ in a class of \_\_\_\_ . This rank is: ☐ Weighted ☐ Unweighted (mark only one)

b. We do not calculate or disclose exact rank, but I estimate this applicant's position to be within the top \_\_\_\_ percent of his or her class.

High School Average (at time of application): \_\_\_\_ High School Average is: ☐ Weighted ☐ Unweighted (mark only one)

Do you anticipate that the applicant will have (check all that apply):

☐ Successfully completed two or more Advanced Placement (AP) or International Baccalaureate courses (IB) with (minimum) test scores of 3 or higher on AP exams and 4 or higher on IB exams.

☐ Successfully completed, with passing grades, all of the following: 4 years of English; 3 years of Math (including Algebra 1 and higher level courses such as Algebra II, Geometry); 3 years of science (including at least two from biology, chemistry, physics); 3 years of social studies; and one year of foreign language.

☐ Met your state's recognized rigorous HS program.

Counselor's Name (Mr./Ms./Dr., etc.): \_\_\_\_ Title: \_\_\_\_

Counselor's Signature: \_\_\_\_ Date: \_\_\_\_

Secondary School: \_\_\_\_ CEEB/ACT Code: \_\_\_\_

School Address: \_\_\_\_  
Number and Street City or Town State/Province Country ZIP/POSTAL CODE

Teacher's phone (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ Teacher's e-mail: \_\_\_\_  
Area Code Number Ext.

# (附件 2 FSA-2 小論文 Personal Essay )

## 2016-2017 Essay Prompts

1. Some students have a **background, identity, interest, or talent** that is so meaningful they believe their application would be incomplete without it. If this sounds like you, then please share your story.
2. The **lessons we take from failure** can be fundamental to later success. Recount an incident or time when you experienced failure. How did it affect you, and what did you learn from the experience?
3. Reflect on a time when **you challenged a belief or idea**. What prompted you to act? Would you make the **same decision again**?
4. Describe **a problem you've solved or a problem** you'd like to solve. It can be an intellectual challenge, a research query, an ethical matter the scale. Explain its significance to you and what **steps you took or could be taken to identify a solution**.
5. Discuss **an accomplishment or event**, formal or informal, that marked your **transition from childhood to adulthood** within your culture, community, or family.

# (附件 3 FSA-3 英文能力證明 English Proficiency Report )

SUNY ENGLISH PROFICIENCY REPORT The State University of New York				
<b>DIRECTIONS TO THE STUDENT</b>				
1. Complete Part I and address an envelope to the Admissions Office at the SUNY campus you have named in No. 5. It is recommended that you provide the necessary postage for delivery to the United States.				
2. Take the form and the postage paid envelope to a qualified person (See Part II below for information on qualified persons), and request that he or she complete Part II and mail the form in the envelope you provide.				
<b>PART I. (Type directly into the form or print and write clearly in ink)</b>				
1. FAMILY NAME		GIVEN NAME(S)		
2. ADDRESS IN HOME COUNTRY	NO. AND STREET	TOWN OR CITY	PROVINCE OR STATE	COUNTRY
3. EMAIL		4. TELEPHONE NUMBER		
5. NAME AND LOCATION OF CAMPUS TO WHICH YOU ARE APPLYING		6. DATE YOU EXPECT TO COMMENCE STUDIES MONTH: YEAR:		
7. HISTORY OF STUDENT'S FORMAL STUDY OF ENGLISH				
	Number of Years	Number of Months per Year	Number of Hours per Week	Native Language of Instructor(s)
8. OTHER COMMENTS (THE STUDENT SHOULD ARRANGE TO HAVE THE SCORES SENT TO THE CAMPUS TO WHICH HE/SHE IS APPLYING.)				
2. HOW LONG HAVE YOU KNOWN THE STUDENT?				
3. PLEASE "X" THE APPROPRIATE BOXES TO INDICATE YOUR OPINION OF THE STUDENT'S PRESENT ABILITY IN ENGLISH FROM THE STANDPOINT OF THE LANGUAGE PROFICIENCY USUALLY NEEDED FOR EFFECTIVE PURSUIT OF STUDIES AT A COLLEGE OR UNIVERSITY IN THE UNITED STATES.				
Speaks English: <input type="checkbox"/> Fluently <input type="checkbox"/> With ease, but with some hesitation <input type="checkbox"/> At an elementary level <input type="checkbox"/> No ability				
Understands spoken English: <input type="checkbox"/> Excellent comprehension <input type="checkbox"/> Good comprehension <input type="checkbox"/> Simple vocabulary only <input type="checkbox"/> Not at all				
Understands written English used in: <input type="checkbox"/> Advanced level materials <input type="checkbox"/> Intermediate level materials <input type="checkbox"/> Elementary level materials <input type="checkbox"/> No ability				
Expresses thoughts in written English: <input type="checkbox"/> With fluency <input type="checkbox"/> With ease, but with some grammatical errors <input type="checkbox"/> On an elementary level only <input type="checkbox"/> No ability				
4. PLEASE RECOMMEND AN APPROPRIATE BEGINNING COURSE LOAD AT AN AMERICAN INSTITUTION OF HIGHER EDUCATION FOR THIS STUDENT:				
<input type="checkbox"/> Needs no additional language training; could carry a full academic program				
<input type="checkbox"/> Needs no special coursework, but could require occasional assistance				
<input type="checkbox"/> Needs a short-term intensive English program prior to starting academic coursework				
<input type="checkbox"/> Needs one semester or more in an intensive English language program				
<input type="checkbox"/> Is unqualified for academic work				
(PLEASE PRINT) NAME OF PERSON PREPARING REPORT		OFFICIAL POSITION		
		INSTITUTIONAL AFFILIATION		
SIGNATURE OF PERSON PREPARING REPORT		DATE		

分兩部分, 上半部由申請學生打入  
下半部由指導老師或校方填寫

The person completing this form should mail it directly to the State University of New York campus to which the student is applying, in a properly addressed envelope that the student has been instructed to supply. Please feel free to include any other remarks on a separate page.

# (附件 4 FSA-4 財力證明 Financial Statement)



## INTERNATIONAL STUDENT FINANCIAL STATEMENT The State University of New York

This is a two-page form. Be sure to read all information before completing this form.

International students must document their ability to meet all educational and living expenses for the first year of their intended study before this University can issue a Certificate of Visa Eligibility (Form I-20 or DS-2019) per immigration regulations. Although you must show proof for the first year of study, funding must be available for your entire course of study from your personal or sponsored funding sources. International students are NOT eligible for financial aid and U.S. Federal immigration regulations severely restrict international student employment so students should not expect to subsidize their studies by earning income in the United States.

### INSTRUCTIONS:

**Part I:** Answer all questions in Part I completely.

**Part II:** In the first column, indicate the source(s) of your funding. In the column headed Year 1, indicate the amount (in U.S. dollars) available for each year of study. Each sponsor must verify these amounts by signing the form. Be sure to include supplementary documents as indicated and provide official documentation of funding. Please note that if you send originals by mail, you must retain a set of originals for your visa interview. The originals sent to the campus will not be returned.

All documentation must be dated within six (6) months of the date of initial enrollment at the SUNY campus to which you are applying. A more current version may be requested by the individual SUNY campus to verify funding. The SUNY campus has provided you with an estimate of their annual education and living costs for international students. You must document financial support equal to or greater than this amount. Tuition and fee estimates, as well as cost of living expenses, are subject to change without notice and will usually increase each year. Students must be prepared to meet these increases.

**SOURCE OF FUNDS: REQUIRED DOCUMENTATION:** \*\*Please provide in English and in U.S. dollars.

**Personal Savings:** If you are providing personal savings, indicate the source of the funds (e.g., bank account, etc.) and the amount available for each year of study. If you are providing a loan, indicate the lender and the amount of the loan. If you are providing a scholarship, indicate the sponsor and the amount of the scholarship. If you are providing a grant, indicate the sponsor and the amount of the grant. If you are providing a combination of the above, indicate the source and amount of each.

**Scholarship:** If you are receiving a scholarship, indicate the sponsor and the amount of the scholarship. If you are receiving a grant, indicate the sponsor and the amount of the grant. If you are receiving a combination of the above, indicate the source and amount of each.

**Government or Employer:** Official letter indicating amount of support and containing the same information as for "Scholarship" described above.

**Loans:** Official letter from credit institution indicating approval of the loan and the amount approved.

**Dependent Support:** A student wishing to have his/her family member(s) accompany him/her must document additional funding for each family member per calendar year of intended study. Each campus will provide you with the required spouse/child documentation. The costs may vary based on campus and regional area and are estimated living costs.

The SUNY campus to which you are applying reserves the right to require additional financial documentation and/or pre-payment from students whose countries impose currency exchange restrictions or other obstacles to the transfer of currency. Students from such countries will be notified of specific requirements when they have submitted a completed application.

### PART I. (Type directly into the form or print and write clearly in ink)

NAME OF STUDENT: FAMILY/LAST NAME		FIRST/GIVEN		MIDDLE
PERMANENT ADDRESS IN HOME COUNTRY: STREET				
CITY	PROVINCE, IF APPLICABLE OR STATE	COUNTRY	POSTAL CODE	
CITIZENSHIP	COUNTRY OF BIRTH	DATE OF BIRTH (YEAR)		
CAMPUS TO WHICH YOU ARE APPLYING		DEGREE FOR WHICH YOU ARE APPLYING		MAJOR FIELD/DEPARTMENT
<b>DEPENDENTS:</b> <input type="checkbox"/> I plan to come without dependents <input type="checkbox"/> The following dependents will accompany me (list names and relationships): _____ _____		<b>FUNDING:</b> Does your country restrict dollar exchange? <input type="checkbox"/> Yes <input type="checkbox"/> No What is the maximum dollar amount permitted for a student? \$ _____ Do you have a source within the U.S. for emergency funds once you arrive in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, name source: _____ Amount available in U.S.: \$ _____		

## 第一部分:基本資料



## INTERNATIONAL STUDENT FINANCIAL STATEMENT The State University of New York

**PART II.** Complete all that apply. Enter amount of assured support for the first year in U.S. Dollars. These funds, plus expected increases, are expected to be available for each year of study in the U.S. by the student's funding source/sponsor.

SOURCE OF FUNDS	YEAR 1	REQUIRED VERIFICATION
<b>PERSONAL SAVINGS:</b> Name of Bank: _____ Account Holder: _____	\$ _____	1. Bank Statement/Letter from Bank on official bank letterhead. 2. Complete (A) and (C).
<b>FAMILY/RELATIVE/EMPLOYER:</b> Name: _____	\$ _____	1. Official letter from Bank on official bank letterhead with name and address. 2. Bank statement/letter. See instructions on page 1. 3. Complete (C).
<b>SCHOLARSHIP:</b> Awarded by: _____	\$ _____	1. Official award letter. See instructions on page 1. 2. Approval letter. See instructions on page 1. 3. Complete (C).
<b>GOVERNMENT/EMPLOYER:</b> Name of Sponsor: _____ Other (specify source and type of support): _____	\$ _____	1. Official letter of support. See instructions on page 1. 2. Bank statements, affidavits, or sworn statements. 3. Complete (C).
<b>TOTAL:</b>	\$ 0	

## 第二部分:就讀時 經濟規劃預算

### VERIFICATION:

A. This is to certify that the funds indicated above are on deposit or are being held in the name of the account holder listed above, family members, or sponsors (named above) at the savings institution named below. Verification of amounts is without liability for the bank or its officials. Attach separate statement of accounts on official bank letterhead or with official signature/seal.

Name of Bank: \_\_\_\_\_ Date: \_\_\_\_\_  
Bank Official's Name: \_\_\_\_\_  
Bank Official's Title: \_\_\_\_\_ Signature/Seal: \_\_\_\_\_

## 銀行資料

B. This is to certify that I the undersigned have agreed to provide the funds indicated above to the applicant for the purpose of full-time study at the State University Campus listed above and that I am submitting bank statements indicating the availability of these funds. I further understand that the State University cannot provide ANY financial assistance to the applicant and that I must provide these funds for the duration of the applicant's course of study. If the commitment is not met, the student may be subject to dismissal from the University for non-payment. If the student has more than one sponsor, please provide the names, signatures and relationship information on a separate page.

Sponsor's Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Sponsor Signature: \_\_\_\_\_ Email: \_\_\_\_\_

C. This is to certify that the information given on this form is complete and accurate to the best of my knowledge. I am fully aware that any false or misleading statement will result in an automatic denial of admission, or cancellation of registration following enrollment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return this form with all additional financial documentation directly to the SUNY campus to which you are applying.

(附件 5 Supplemental Application 補充資料 )

[illegible]

Honors/Awards Tab: Academic Distinctions Section

Academic Distinctions. Please check all that apply, based on information available at time of application:

☐ Valedictorian   
☐ Salutatorian   
☐ National Merit Semi-Finalist/Finalist   
☐ Intel Competition Semi-Finalist/Finalist

Honors/Awards Tab: Honors/Awards Section

List any awards or special recognition you have received for academic, work or volunteer activities. List the grades in which you achieved each honor/award.

Honors/Awards Description	Grades Achieved

Activities Tab

List any primary extracurricular activities (student government, volunteer/community service, etc.) you have participated in during high school and note any leadership roles you have held.

Description	Grades Participated	Leadership

Work Experience Tab

List your work experience (including part-time, summer and volunteer experience). Indicate dates and

Description	Employer/Organization	Dates

Other Tab

Has your mother or father earned a bachelor's degree?    ☐ Yes    ☐ No

High School Counselor information.

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Essays Tab: Essay Section

Write an essay (250-650 words) on a topic assigned to 2014-15 Common Application applicants.

Indicate the topic you have selected to write on and choose to attach your essay to this form.

☐ Some students have a background, perspective, or talent that distinguishes them from others. If this sounds like you, please describe your background, perspective, or talent.

☐ Recount an incident or time when you experienced a challenge, failure, or setback and describe how you overcame it.

☐ Reflect on a time when you challenged a belief or idea.

☐ Describe a place or environment that has been significant to you.

☐ Discuss an accomplishment or event, formal or informal, that shaped your perspective.

☐ Topic of your choice

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250-650

Essays Tab: Essay Section

Write an essay (250–650 words) on one of the topics listed below. (Required)

(Signed to 2014–15 Common Application topics.)

Indicate the topic you have selected by filling in the circle. You may continue writing on the back page if more space is needed, or you may choose to attach your essay to this form. Be sure to include your name on any attachments.

☐ Some students have a background or story that is so central to their identity that they believe their application would be incomplete without it. If this sounds like you, then please share your story.

☐ Recount an incident or time when you experienced failure. How did it affect you, and what lessons did you learn?

☐ Reflect on a time when you challenged a belief or idea. What prompted you to act? Would you make the same decision again?

☐ Describe a place or environment where you are perfectly content. What do you do or experience there, and why is it meaningful to you?

☐ Discuss an accomplishment or event, formal or informal, that marked your transition from childhood to adulthood within your culture, community, or family.

☐ Topic of your choice

擇一個主題寫小論文

250–650字

Essays Tab: Personal Statement Section

Please provide additional information (up to 250 words) that will help us better understand your academic performance. You may also use this space to explain any chronological gaps in your academic history (e.g., a period of time after high school graduation before applying to college). You may continue writing on the back page if more space is needed, or you may choose to attach your answer to this form. Be sure to include your name on any attachments.

求學經歷-依時間順序

簡述 250字以內