Financial Certification
University of Wisconsin - La Crosse

All applicants seeking an F-1 student visa, or who are applying to maintain F-1 student status, are required by law to document that sufficient funds are available to cover all expenses while attending the university. *(This form is not required if you are a U.S. citizen, permanent resident, or if you are in the U.S. on another type of visa.)*

1. You are **required** to certify that you will have the total amount necessary for your program of study. Please refer to the *"Current Information"* to determine costs for your program of study. Plan for an estimated increase of 7% each year.

2. It is essential that you have sufficient funds to support yourself and any dependents during your entire academic program. Do **not** plan on working to pay for your expenses or on financial assistance from the university.

3. Keep a copy of all financial support documents to present to the U.S. Consul when you apply for your student visa.

PERSONAL FINANCIAL INFORMATION (please PRINT clearly)

_____ _____ _____
Last (family) name First (given) name Middle name

Applying for: [ ] ESL Institute Study [ ] Undergraduate (Bachelors) Study [ ] Graduate (Masters) Study

Amount available for your study: $ _____
(Minimum acceptable must equal Estimated Total for your program of study as indicated on the enclosed *"Current Information"*)

Please mark all of the following that apply. You must include the required documentation confirming that you have sufficient funds to pay for your tuition and expenses while you study at UW-La Crosse. All letters and statements must be **in English** and must be **original documents**.

Who will support you?	**Required documentation:**
[ ] SELF	Financial statement or a letter from your bank
[ ] PARENT(S]	Financial statement and signature below or a letter stating that your parent(s) agree to support you during your study at the University of Wisconsin-La Crosse. Name: _____
[ ] RELATIVE(S)	Financial statement(s) and signature(s) below or letter(s) stating that your relative(s) agree to support you during your study at the University of Wisconsin-La Crosse Relationship: _____ Name(s): _____
[ ] OTHER	Financial statement(s) and signature below or letter(s) stating that indicated person(s) agree to support you during your study at the University of Wisconsin-La Crosse Relationship: _____ Name(s): _____
[ ] SPONSOR	Documentation from your government , employer, or scholarship agency which states what funds will be provided for your study. Name(s): _____

BY SIGNING THIS DOCUMENT, I agree to be financially responsible for the student named above while he/she attends the University of Wisconsin –La Crosse. I understand that the amounts listed on the *"Current Information"* are estimates and are subject to change.

_____ _____ _____
Complete Name Signature Date

_____ _____ _____
Complete Name Signature Date

I certify that all information I have provided is correct and complete. I agree to be fully responsible for my tuition, fees, and all living expenses while studying at the University of Wisconsin-La Crosse. Further, I certify that I shall not require additional assistance from the University. I understand that failure to pay all debts to the university will result in immediate dismissal.

Signature of student: _____ Date: _____
(Signature of parent or guardian is required if student is less than 18 years old.)

Marital Status: [ ] Single [ ] Married Will your spouse or children accompany you? [ ] No [ ] Yes If yes, you must provide the following information and evidence of sufficient funding ($4500 for spouse; $2000 for each child)

Complete Name	Relationship	Date of Birth	Place of Birth	Nationality