

Admissions

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Affidavit of Support: Fall/September 2021 – Spring/January 2022

Students seeking F-1 or J-1 student status are required by law to document that sufficient funds are available to cover all expenses while attending the university. Keep a copy of all financial support documents to present when you apply for your student visa.

ESTIMATED ANNUAL EXPENSES:

Table is for reference and includes Fall/September and Spring/January semesters only.

EXPENSE	UW-La Crosse UNDERGRADUATE	UW-La Crosse GRADUATE	UW-La Crosse ESL Institute
Tuition and Fees	\$18,500	\$20,600	\$11,300
Housing	(Eagle Hall) \$4,780	(Reuter Hall) \$6,170	(Eagle Hall) \$4,780
Meal Plan (based on the Eagle Meal Plan)	\$2,675	\$2,675	\$2,675
Health Insurance	\$1,770	\$1,770	\$1,770
Personal Expenses	\$2,000	\$2,000	\$2,000
TOTAL (USD)	\$29,725	\$33,215	\$22,525

Program (circle one):

**UW-La Crosse
UNDERGRADUATE**

**UW-La Crosse
GRADUATE**

**UW-La Crosse
ESL Institute**

Who will sponsor you? <small>Check all that apply</small>	Amount of Support <small>Enter amount in USD</small>	Required Documentation <small>All statements should be on bank letterhead and certified (signed and stamped) by the bank. Documents must be less than six months old.</small>
<input type="checkbox"/> Self	\$	Attach a copy of your certified bank statement with a current available balance greater than or equal to the amount indicated.
<input type="checkbox"/> Relative(s)	\$	1. Sign the statement of support below. 2. Attach a copy of your sponsor's certified bank statement with a current available balance greater than or equal to the amount indicated.
<input type="checkbox"/> Other Sponsor	\$	Attach a copy of documentation from your government, employer, or scholarship agency indicating the amount of funding that will be provided.
TOTAL AMOUNT *	\$	<small>* Total amount must meet or exceed the estimated expenses for one academic year (9 months) of study from the table above..</small>

RELATIVE/SPONSOR'S STATEMENT OF FINANCIAL SUPPORT: By signing this document, I agree to be financially responsible for the student named above while he/she attends UW-La Crosse. I understand that all costs may be subject to change.

Relative/Sponsor's Name (Print) _____ Relationship to Student: _____

Relative/Sponsor Signature: _____ Date: _____

Student's Name (Print): _____

Surname/Family Name
First/Given Name
Middle Name

Marital Status: [] **Single** [] **Married** Will your spouse or children accompany you as F-2 dependents? [] **No** [] **Yes**
 *If yes, you must provide evidence of sufficient funding for your spouse and/or children (additional \$5,000 required for spouse; \$3,000 for each child). You must also submit passport copies of any dependents in need of an F-2 visa to the Admissions Office.

Signature of student: _____ Date: _____