

Affidavit of Support: Fall/September 2026 – Spring/January 2027

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
Tuition and Fees	\$21,360	\$23,525
Orientation Fee and Enrollment Fee (one-time fees)	\$350	\$175
Housing	(Eagle Hall) \$5,745	(Reuter Hall) \$7,315
Meal Plan (based on the Stryker Classic)	\$3,255	\$3,255
Health Insurance	\$2,250	\$2,250
Personal Expenses	\$1,500	\$1,500
TOTAL (USD)	\$34,460	\$38,020

Program (circle one):

**UW-La Crosse
UNDERGRADUATE**

**UW-La Crosse
GRADUATE**

Who will sponsor you? Check all that apply	Amount of Support Enter amount in USD	Required Documentation All statements should be on bank letterhead and certified (signed and stamped) by the bank. Documents must be less than six months old.
<input type="checkbox"/> Self	\$	Submit 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. Submit 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	\$	Submit a copy of documentation from your government, employer, or scholarship agency indicating the amount of funding that will be provided.
TOTAL AMOUNT	\$	

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: _____