



University of Wisconsin-Eau Claire

FINANCIAL STATEMENT FOR UNDERGRADUATE EXCHANGE APPLICANTS

Hessen-Wisconsin Student Exchange (Germany)

Fall 2023-Spring 2024

STUDENT'S NAME (print) _____
Last (family or surname) First (given) Middle (if applicable)

You are required to certify that you will have available the funds for your entire exchange at the University of Wisconsin-Eau Claire. **The University of Wisconsin-Eau Claire requires that fees be paid in full at the beginning of each semester.** The amount you are required to certify is based on your home university's exchange agreement with UW-Eau Claire. **Submit a completed copy of this form and supporting documents to the Center for International Education.**

Exchange programs which cover tuition only: Students in the Hessen-Wisconsin student exchange must provide financial proof of a total of \$7930 per semester. The fees related to room, meal plan, orientation, book rental, and insurance are not covered in the exchange. See chart for breakdown of expenses. **This is an anticipated estimate of charges:**

Expense	USD
Room and board	\$4400
Insurance	\$950
Orientation & fees	\$425
Personal expenses (estimated)	\$1340
Segregated student fee	\$800
Total	\$7930

By signing this form, you are certifying that the information is a correct statement of your arrangements for financing your studies at the University of Wisconsin - Eau Claire. **You must send financial support documents proving the total amount. Examples include certified letter from your bank, certified bank statement, or certified scholarship letter for the time period you will be studying at UW - Eau Claire.**

A DS-2019 form (for issuance of your J-1 visa) cannot be issued until you have been admitted to UW – Eau Claire and you have proven that you have sufficient funds to study at UW – Eau Claire.

Please check appropriate box:

- ☐ I expect to study at UW - Eau Claire for one semester only.
☐ I expect to study at UW- Eau Claire for two semesters.

STUDENT'S NAME (print) _____
Last (family or surname) First (given) Middle (if applicable)

SOURCES OF FUNDING

AMOUNT OF FUNDING

YOUR GOVERNMENT OR UNIVERSITY: _____ \$
(Note: Enclose an original or certified true copy of award from your government or university sponsor.)

PARENTS AND/OR SPONSOR(S)
Print name of each person _____ \$
(Note: Signature of parent and/or sponsor necessary below;
Enclose original bank statements or official letter from sponsor's bank)

STUDENT RESOURCES _____ \$
(Note: Enclose original bank statements or official letter from your bank.)

OTHER FUNDING SOURCE
Please specify _____ \$
(Note: Enclose a signed affidavit from an authorized person to certify accuracy of award/funding.)

TOTAL _____ \$
(Note: The total should be equal or greater than the total cost of your program.)

SPONSOR CERTIFICATION OF SUPPORT

FOR PARENTS AND/OR SPONSOR:

Parent and/or sponsor must submit original banks statements or a letter from the bank showing the sponsor has enough funds to support the student.

By signing this document, I agree to be financially responsible for the student named below while he/she attends the University of Wisconsin – Eau Claire. I understand that the amounts listed are estimates and are subject to change.

STUDENT'S NAME (PRINT) _____
PARENTS AND/OR SPONSOR'S NAME(S) (PRINT) _____
PARENTS AND/OR SPONSOR'S SIGNATURE _____
RELATIONSHIP TO APPLICANT _____
MAILING ADDRESS _____

STUDENT CERTIFICATION OF INFORMATION

I certify that all information I have provided is correct and complete. I agree to be fully responsible for the fees associated with my study at the University of Wisconsin – Eau Claire. Further, I certify that I shall not require additional financial assistance from the university. I understand that failure on my part or that of my sponsor to provide the necessary funds may result in the cancellation of my registration and my termination from my program of study at the University of Wisconsin – Eau Claire.

STUDENT SIGNATURE _____ DATE _____