University of Wisconsin-Stevens Point

Financial Support Statement for International Undergraduate Program Applicants

Estimated expenses for nine Wisconsin-Stevens Point are		•	he 20	25-2026 acad	emic yea	r at the University of	
Tuition and fees (approximate)		18,30	4.00	PLEASE NOTE: This is a relatively conservative budget for a student who spends wisely and is willing to share on campus living quarters with another student. While some students			
Campus Housing		5,05				,	
Campus Meal Service		3,750.00		may need less money, many students find that they spend more than this amount. This estimate does not include the cost of international travel or keeping an automobile.			
Health & Accident Insurance		2,000.00					
Total		\$29,104.00					
				*Insurance premium for one calendar year: August 5, 2025 – August 4, 2026 Expenses may vary from estimates. Official tuition rates are set in August.			
Name of Applicant:							
	Family Name		Given Name			Middle Name (if applicable)	
Semester you plan to enter	Fall (September)			Spring (January)		Year 202_	
Choose ONE:							
I will be self-supporting.		I will be sponsored by		· ———		will be	
(Please submit original bank statement* showing available funds of at least \$29,104)		more individuals. (Please sponsor(s) complete form(s) and bank statements* totaling at least \$		and submit	and submit (Please submit official documentation		
*An original bank statement is one on bank letterhead, with an official seal. We will accept faxed documents only if faxed directly from yo bank or the sponsor's bank. Your application for admission will not be considered unless both statements below are completed a supported by the requested official documentation.							
SPONSOR'S STATEMENT							
I,, certify that I have read and understand the above financial support statement. I further							
certify that I have the financia		es to cover the expe	enses	of the studen	t,	addition for travel expenses	
for a round trip from the stud this individual is in the United this amount in U.S. currency is financial support will be consi Point.	States. A s attached	ne to the University n original bank stat d. I understand that	of Wi emen the in	sconsin-Steve t on bank lett nclusion of an	ens Point erhead re y false in	for each calendar year while eflecting a balance of at least formation concerning	
Sponsor's Name Printed	Sponsor's Signature						
Date Relationship to Student							
**********	******	APPLICANT'S S			******	*********	
I certify that all statements on to notify the University of Wiscons understand that failure on my paregistration will result in the car University of Wisconsin-Stevens	sin-Steven part or thancellation Point.	s Point of any chang t of my sponsor to p of my registration a	ges in provide nd my	my financial ce the needed termination f	ircumstan unds regar rom the u	ices or those of my sponsor. I ardless of prior admission and indergraduate program at the	
Student's Name Printed Date		Stud	ent's Signatui	e			