



OSHKOSH
GRADUATE STUDIES

CONFIDENTIAL DECLARATION OF FINANCIAL RESOURCES
FOR INTERNATIONAL GRADUATE STUDENT APPLICANTS

This form is to be completed by both the student and his/her sources of financial support. All signatures must be original. Bank statements must be officially stamped or sealed. All amounts are to be calculated in US dollars. For additional consideration for a nonresident tuition waiver, complete the separate Nonresident Partial Tuition Waiver Application form.

Office of Graduate Studies
University of Wisconsin Oshkosh
800 Algoma Blvd., Dempsey Hall 337
Oshkosh, Wisconsin 54901 USA

<u>Estimated Annual Expenses (2008-2009)</u>	<u>9 months</u>	<u>12 months</u>
Tuition and Fees	\$18,763	\$24,841
Living Expenses including books and supplies	\$ 9,456	\$12,684
Medical Insurance	\$ 756	\$ 1,134
TOTAL	\$28,975	\$38,659

Applicant Name _____
Last (Family)
First
Middle

Home Address

(Please print complete addresses in the format most commonly used. Include all postal codes.)

Mailing Address

E-mail Address: _____

Date of Birth: _____ Country of Birth: _____
Month/Day/Year

Country of Citizenship: _____

Desired Visa Status: Student (F-1) Exchange Visitor (J-1)
 (check one) Temporary Worker (H-1B) Other
 Dependent of H-1 (H-4) (Please specify) _____

US Immigration Admission Number, if issued: _____

GENERAL INFORMATION

1. Graduate program to be pursued: _____
2. Expected starting semester: Fall Spring Summer Year 20_____
3. List friends or relatives attending UW Oshkosh: _____

FINANCIAL SUPPORT INFORMATION

This information is required to determine financial need.

Applicants who request a nonresident partial tuition waiver are required to answer all questions. Both continuing and first semester international students may compete for graduate assistantships and/or nonresident partial tuition waivers.

4. Father:	Mother:
_____	_____
Name	Name
_____	_____
Age	Age
_____	_____
Occupation	Occupation
_____	_____
Annual Income	Annual Income
_____	_____
Employer	Employer

5. Parents: (Please check) Married Divorced Mother deceased Father deceased

6. List any brothers and sisters and their ages:

7. Are any brothers and sisters in college? Yes No

Where? _____

8. Do you provide financial support to your family? Yes No

If yes, how much, in what form, and how often? _____

9. Other relatives dependent upon your family's income?

10. Do you have dependents? Yes No

11. Will any of your dependents accompany you to this country? Yes No

If yes, who? _____

12. List your family's average annual expenses (in US Dollars)

Food:	\$ _____
Clothing:	\$ _____
Housing: Rent/Mortgages	\$ _____
Taxes:	\$ _____
Other:	\$ _____
TOTAL	\$ _____

13. What amount or percent of your family's average annual expenses do you pay? \$ _____ % _____

14. Value of family assets:

Land & Buildings:	\$ _____
Automobiles:	\$ _____
Savings:	\$ _____
Investments:	\$ _____
Debts:	\$ _____
Other:	\$ _____

15. Does your family receive income from assets held in another country? Yes No

16. YOUR SPONSOR or GUARANTOR

Name:	_____
Occupation:	_____
Employer:	_____
Annual Gross income:	_____

18. Does your government impose any restrictions on the release of funds for study in the United States?
Yes No

19. What is the present exchange rate of your country's currency to U.S. Dollars?

_____	_____
Your country's currency	United States Dollars

Please PRINT. Indicate a **USD amount** for each numbered category. Be certain to list an amount in the appropriate category under BOTH the first and second year columns. Also **provide financial documents and statements** to substantiate the amounts. Attach additional documents if necessary.

TO SOURCES OF FUNDS LISTED

An official certification means you have read the information furnished by the applicant on this form, agree that it is a true and accurate statement, and that funds shown are available and will be provided for educational expenses as indicated.

SOURCE OF FUNDS	First Year of Studies (USD)	Second Year of Studies (USD)	Official Certification
<p>1 PERSONAL</p> <p>A bank official's signature is required if the applicant is partially or totally supported by personal funds.</p>	\$ _____	\$ _____	<p>SIGNATURE OF BANK OFFICIAL: _____</p> <p>TITLE: _____</p> <p>ADDRESS OF BANK: _____</p> <p>DATE: _____ SEAL: _____</p>
2. PARENTS	\$ _____	\$ _____	<p>SIGNATURE OF PARENTS: _____</p> <p>ADDRESS: _____</p> <p>DATE: _____</p>
<p>3. SPONSOR or GUARANTOR</p> <p>_____ Name</p>	\$ _____	\$ _____	<p>SIGNATURE OF SPONSOR or GUARANTOR: _____</p> <p>ADDRESS: _____</p> <p>DATE: _____ (NOTE: OFFICIAL BANK CERTIFICATION MUST BE ATTACHED)</p>
4. NAME OF GOVERNMENT GRANT OR SCHOLARSHIP	\$ _____	\$ _____	<p>NAME OF AGENCY: _____</p> <p>(NOTE: ENCLOSE WITH THIS FORM A SIGNED COPY OF YOUR LETTER OF AWARD)</p>
<p>5. OTHER (SPECIFY)</p> <p>_____</p> <p>_____</p>			<p>(NOTE: ENCLOSE WITH THIS FORM A SIGNED AFFIDAVIT FROM AN AUTHORIZED PERSON TO CERTIFY THE ACCURACY OF THIS ENTRY)</p>
TOTAL	\$ _____	\$ _____	

I certify that the amount of monies indicated herein is available for all of my graduate studies at the University of Wisconsin Oshkosh. All **amounts are shown in US dollars**. Further, I certify that the above information is correct and complete. I understand that providing false or misleading information may result in a denial or withdrawal of admission and/or enrollment in classes and may jeopardize my student visa status.

Signature of Applicant

Date