## Financial Verification Process for Hessen-Wisconsin Exchange Applicants

Fall 2025 - Spring 2026

**Important**: This form only applies to the Hessen – Wisconsin Exchange (Germany) agreement. If you are coming to UW-Eau Claire through a different exchange agreement, use the "Undergraduate Exchange Financial Verification Form."

## **Total Program Cost**

As a student in the Hessen-Wisconsin Exchange Program, you must prove you have sufficient funds to pay UW-Eau Claire the total program cost per semester. For the 2025-2026 academic year, the total program cost per semester is \$8,363, which includes:

EXPENSE	USD
Room and Board	\$ 4,490
Segregated Fees and Textbook Rental	\$ 943
Health Insurance	\$ 1,160
Orientation and Fees	\$ 425
Personal Expenses	\$ 1,345
Total Program Cost per Semester	\$ 8,363

Total Program Cost per Semester for Hessen-Wisconsin Exchange Agreement (subject to change)

## **Overview of the Financial Verification Process**

First, fill out the Hessen-Wisconsin Exchange Financial Verification Form.

Then, collect all your corresponding certified financial documents (more details are in the form).

Finally, email your completed Hessen-Wisconsin Exchange Financial Verification Form and all certified financial documents to the UW-Eau Claire Center for International Education.

# Hessen-Wisconsin Exchange Financial Verification Form

By completing and signing this form, you certify that the information is a correct statement of your arrangements for financing your studies at the University of Wisconsin-Eau Claire.

In addition to this form, you must send corresponding certified financial documents to the UW-Eau Claire Center of International Education to show you have sufficient funds to pay for the total program cost per semester. All financial documents sent to the UW-Eau Claire Center for International Education must be certified. Screenshots of online bank statements cannot be accepted since they are not certified.

A DS-2019 form (for issuance of your J-1 visa) can only be issued once you have been admitted to UW-Eau Claire and you have proven that you have sufficient funds to study at UW-Eau Claire.

The University of Wisconsin-Eau Claire requires full payment of all semester costs at the beginning of each semester.

### **Student Information & Funding Sources**

Student Name (Print):

Last (Family or Surname)	First (Given)

Middle (If Applicable)

How long will you study at UW-Eau Claire? Select one:

**One** semester. **Two** semesters.

Complete the table to reflect how you will pay the Total Program Cost:

<b>Sponsor Type</b> Check all that apply	<b>Sponsor Name</b> Enter the name(s) for each selected sponsor type.	Amount of Funds Enter the amount in USD	<b>Certified Financial Documents</b> All statements should be on bank letterhead and certified (signed and stamped) by the bank. Documents must be less than six months old.
Government or University		\$	Enclose an original or certified true copy of the award from your government or university sponsor.
Relative(s) and/or Sponsor(s)		\$	Relative(s) and/or sponsor(s) are required to sign this form; Enclose certified bank statements or official letter from the sponsor's bank.
Self		\$	Enclose a certified bank statement or official letter from your bank.
Other		\$	Enclose a signed affidavit from an authorized person to verify the accuracy of award/funding.
TOTAL FUNDS*		\$	*Combined documentation must show available funds greater than or equal to the total program cost.

### **Relative/Sponsor Statement of Financial Support**

By signing this document, I agree to be financially responsible for the student named below while they attend the University of Wisconsin–Eau Claire. I understand that all costs may be subject to change. I understand that I must provide a certified bank statement with the current available balance greater than or equal to the amount of support I indicated in the above section.

Student Name:
Relative/Sponsor(s) Relationship to Student:
Relative/Sponsor(s) Name(s):
Relative/Sponsor(s) Signature(s):
Relative/Sponsor(s) Mailing Address:
Date Signed (Month / Day / Year):

## **Student Signature**

I certify that all information I have provided is correct and complete. I agree to be fully responsible for the costs associated with my study at the University of Wisconsin–Eau Claire. Further, I verify 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. I understand that submission of false or inaccurate information will be considered sufficient cause to terminate my application or enrollment and that failure to pay all debts to the university may result in immediate dismissal.

Student Signature: \_\_\_\_\_

Date Signed (Month / Day / Year): \_\_\_\_\_