



# International Student Declaration of Finances

(to be submitted with application)



Personal Information:		
<b>Name as it appears on your UW-Stout Application Form:</b> Family Name [surname]      First Name, Middle/Maiden Name		<b>Social Security Number or Stout ID number if assigned</b>
<b>Mailing Address</b> [number and street]	<b>Address Valid Until</b> (mo/day/yr):	<b>Date of Birth</b> [mo/day/yr]:
City, State, Postal Code, Country		
<b>Permanent Home Address</b> [number and street]		
City, State, Postal Code, Country		

Official Certification of Sources of Funds and Amounts: [please print unless a signature is required]		
<b>Personal Savings:</b> [a bank official's signature is required if student is partially or totally supported by personal savings.]		
<b>Name of Bank:</b>	<b>Dollar Amount (\$):</b>	
<b>Bank Certification of Personal Funds:</b> This certifies that I have read the information furnished by the applicant, that it is a true and accurate statement, and that the funds are available. Please attach an official bank letter indicating the funds are available.		
<b>Signature of Bank Official:</b>	<b>Title:</b>	<b>Date:</b>
<b>Bank Address:</b>		
<b>Sponsor(s) Agreement:</b> By signing below I agree to provide the stated amount of funding for this student's education. [Sponsor(s) signature and Bank Certification required]		
<b>Signature:</b>	<b>Print Name:</b>	
<b>Relationship of Sponsor</b> [Mother, Uncle, Friend and the like]:	<b>Dollar Amount (\$):</b>	
<b>Bank Certification of Sponsor's Funds:</b> This certifies that I have read the information furnished by the applicant, that it is a true and accurate statement, and that the funds are available. Please attach an official bank letter indicating the funds are available.		
<b>Signature of Bank Official:</b>	<b>Title:</b>	<b>Date:</b>
<b>Name of Bank:</b>	<b>Bank Address:</b>	
<b>Government Agency</b> [An original letter must be submitted]:	<b>Dollar Amount (\$):</b>	

Certification:	
I certify that the information provided is correct and complete to the best of my knowledge, and I understand that inaccurate information may affect my enrollment status. I authorize the university to release information regarding my studies to my sponsoring agencies.	
<b>Signature of Applicant</b> _____	<b>Date</b> _____