Graduate Statement of Financial Responsibility
Visiting Graduate Exchange Students

U.S. immigration law requires that international exchange students show proof of finances for the duration of their program before the UW may issue any immigration documents. Please complete this form and submit it along with one or more of the following: copy of a bank statement, official bank letter, scholarship letter, or letter of familial support that shows proof of finances equivalent to the appropriate amount listed below.

<table>
<thead>
<tr>
<th>Expenses</th>
<th>One Quarter 3 Months</th>
<th>Two Quarters 6 Months</th>
<th>Academic Year 9 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition and student activity fees are covered by tuition waiver</td>
<td>($9,562)</td>
<td>($19,124)</td>
<td>($28,686)</td>
</tr>
<tr>
<td>Health Insurance (Required)</td>
<td>$706</td>
<td>$1,412</td>
<td>$2,118</td>
</tr>
<tr>
<td>Books and supplies</td>
<td>$402</td>
<td>$804</td>
<td>$1,206</td>
</tr>
<tr>
<td>Room and board</td>
<td>$4,687</td>
<td>$9,374</td>
<td>$14,061</td>
</tr>
<tr>
<td>Other expenses (Personal and Transportation)</td>
<td>$1,187</td>
<td>$2,374</td>
<td>$3,561</td>
</tr>
<tr>
<td><strong>TOTAL (U.S. $) Proof of Funding Required</strong></td>
<td><strong>$6,982</strong></td>
<td><strong>$13,964</strong></td>
<td><strong>$20,946</strong></td>
</tr>
</tbody>
</table>

Please indicate what type of funding you will receive and the amount in U.S. dollars (check all that apply):

- [x] Personal or Family Funds:
  Please list the name and relationship (parent, spouse, etc.) of the person providing the funding. If you, the applicant will support yourself, please write “Self” in the space provided.

- [ ] Scholarship, Loan, or Agency Funds:
  Please list the name of the scholarship, loan, or agency that will provide funds.

- [ ] Funds from a Private Sponsor
  Please list the name of the person(s) sponsoring your studies.

**Total Amount**

*Total amount should be equal to the minimum amount required in the table above.

I certify that I have sufficient funds for study in the U.S. and that I will be responsible for all non-tuition waiver related expenses for the duration of my studies at the University of Washington.

Applicant’s name: _________________________________
(please print or type)

Family Name: ___________________ First Name: ______ Middle Name: _______

Applicant’s Signature: ________________________________

Date: __________________________

To be completed by IP&E. Please indicate effective quarter(s) of any tuition waiver that the student should receive:

- [ ] Academic Year
- [ ] Autumn
- [ ] Winter
- [ ] Spring
- [ ] Summer

Coordinator Name and Email: ________________________________

Updated 12/2014