



Financial Verification Form 2024-2025

Email to: international@wwcc.edu

Walla Walla Community College requires that all F-1 visa applicants provide proof of finances (money) through any combination of personal or sponsored funding. The amount of money to be shown is the estimated total of tuition and other expenses for one (1) year of academic study at Walla Walla Community College (WWCC). **Please be aware that tuition and fees are adjusted each academic year.**

- **If you provide finances from personal or family funds**, a bank letter with sufficient funding is required. The bank letter must be in English and clearly detail the account owner and available funds.
- **If an employer, government, or organization will provide funding**, a signed financial guarantee letter in English from the sponsor detailing amounts and length of sponsorship is required.

This **Certificate of Finances** form can accompany the guarantee letter from the sponsor, but not replace it.

All personal bank and sponsor letters must be dated within six (6) months of the date of confirmation.

The STUDENT is responsible for all payments, even if sponsored by family, government, or other agency. Please review the estimated expenses below:

Associate Degree	Financial Estimate-Per Academic Year Fall/Winter/Spring 2024-2025 15 credits per quarter	Bachelor of Applied Science Degree
Tuition & Fees.....\$11,500*		Tuition & Fees.....\$22,000*
Living Expenses..... \$20,000		Living Expenses..... \$20,000
Medical Insurance \$1,600		Medical Insurance \$1,600
Books & Supplies..... \$528*		Books & Supplies..... \$528*
Total \$33,628	*amount varies by program	Total \$44,800

Please PRINT, in black or blue ink, the name(s) who will be paying the above expenses. **Note:** The name or agency listed below must match the name on the certified bank or sponsor letter. **Enter all amounts in U.S. dollars only.** Use an additional sheet of paper for explanations if necessary.

PERSONAL FINANCES.....(student must contribute).....USD \$ _____

PARENT/FAMILY FINANCES.....USD \$ _____

Name(s): _____ Relationship _____

Numb, Street, PO Box _____ City _____

State/Province/Region _____ Country _____ Postal Code _____

Email: _____ Telephone: _____

GOVERNMENT OR SPONSORING AGENCY.....U.S. \$ _____

Name of Agency _____

Enclose with this form a signed, dated official letter of guarantee or award in English

OTHER

Student Name _____ Year/ Quarter Applied for: _____

Student signature (required): _____ **Date:** _____