

[Sample of a sponsor's letter]

Sponsor's Name
Sponsor's Address
City, State, Zip Code,
Country

[Date]-Very Important

University of Wisconsin-Madison
School of Pharmacy Admissions
777 Highland Avenue
Madison, WI 53705

UW-Madison PharmD Admissions Office,

I, (Sponsor's Name) certify that I will financially support (Student's Name) for all educational, living, health, and personal expenses until completion of his/her Doctor of Pharmacy degree at the University of Wisconsin-Madison. (Student's Name) is my (son, daughter, niece, nephew, cousin, grandson, granddaughter, etc.).

If you have any questions, feel free to contact me at (telephone number) or (email).

Sincerely,

(Sponsor's Name)

(Signature) – Very Important