

Student Name _____

2026-2027 Application for Institutional Aid for International & Undocumented Undergraduate Students

First Year student Fin Aid application deadlines:

Early Action: January 15, 2026

Regular Decision: February 15, 2026

Returning student Fin Aid priority deadline: March 15, 2026

International and undocumented undergraduate students may complete this application to determine financial need for scholarships and grants. Financial need does not guarantee that a student will receive a grant or scholarship. Awards are not designed to meet the student's entire financial need, but supplement the student's other financial resources.

Please return this form to the Office of Financial Assistance by scanning and emailing to finaid@meredith.edu OR faxing to 919-760-2373. If you have questions regarding the form, please email finaid@meredith.edu or call 919-760-8565.

All parts of this application must be completed each year. Please utilize "not applicable" or "n/a" if needed. If any section is left incomplete, the application will not be processed and will cause delays.

Part A: Student Information

Name: Last _____ First _____ M.I. _____

Date of Birth _____ Place of Birth (country) _____ Country(ies) of Citizenship _____

Student's Classification: ☐ International Student ☐ Undocumented ☐ DACA ☐ Other _____

Permanent Address: _____

City, State, Zip Code: _____

Mailing Address (If different from above): _____

City, State, Zip Code: _____

Email address: _____ Cell Phone: _____

When do you expect to begin your studies at Meredith? _____ (month & year)

Will you be: ☐ Attending college for the first time ☐ Transferring from another college ☐ A returning student

• Which deadline are you applying for: ☐ Early Action ☐ Regular Decision

Part B: Parent/Family Information

Email address: _____ Cell Phone: _____

What is your parents'/guardians' current marital status: ☐ Married ☐ Single/Separated/Divorced ☐ Other

List below the members of your household during the 2026-2027 academic year. Include yourself, your parent(s), dependent siblings, and any other dependents for whom you and your parents provide more than half their support.

NAME	AGE	RELATIONSHIP	Name of college, year in school, & enrollment (full, part, or half time) for 2026-2027 academic year	Parents' contribution for college
		Self-student		
		Parent(Step)		
		Parent(Step)		

Student Name _____

Part C: Financial Information

What is the current exchange rate of your country's currency to the U.S. dollar? (example: 3,100 pesos=\$1) _____=\$1

Income Information/Tax Return
 Did your parent(s) file a U.S. federal tax return for 2024? ☐ YES ☐ NO
 If YES, please list your parent(s)' Adjusted Gross Income: \$_____ Taxes Paid: \$_____
 If NO, please list your parent(s)' 2024 income from earnings: Mother: \$_____ Father: \$_____
 Did you (the student) file a U.S. federal tax return for 2024? ☐ YES ☐ NO
 If YES, please list your Adjusted Gross Income: \$_____ Taxes Paid: \$_____
 If NO, please list your 2024 income from wages: \$_____

Asset Information
 As of today, what is the current value of your father/guardian's investments (include cash and savings)? \$_____
 As of today, what is the current value of your mother/guardian's investments (include cash and savings)? \$_____
 As of today, what is the current value of your (the student) investments (include cash and savings)? \$_____
 Do your parents own a business or farm? ☐ YES ☐ NO If YES, what is the current net worth of the business or farm? \$_____
 Does your family own a home? ☐ YES ☐ NO If YES, what is the current value of your home? \$_____
 Do you or your family own an automobile(s)? If YES, what is the make _____ and year _____

Part D: Financial Resources (Note: If a question does not apply, please enter 0)

Please list **ALL** financial assistance you expect for the 2026-2027 academic year.

Student's Contribution: \$_____ Government/Agencies/Foundations: \$_____

Parents'/Guardians' Contribution: \$_____ Private Sponsor: \$_____

Family or Friends Contribution: \$_____ Other (Please specify): \$_____

 Do you have emergency funds once you arrive in the United States? ☐ YES ☐ NO If YES, from who? _____

Part E: Release and Certifying of Information

I, _____ (student's name) grant the following family members, relatives, guardian, etc. permission to discuss my financial aid package and billing information with the Office of Financial Assistance at Meredith College.

Name (First and Last)	Relationship to student

By signing here, I certify that all parts of the application are accurate to the best of my knowledge.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____