



EDGEWOOD COLLEGE FINANCIAL AID

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2025-2026 DREAMER/DACA Student Financial Aid Application

Student Name _____ Edgewood ID# _____

At Edgewood College, we believe in the life, dignity and equality of the human person and that every person is created with infinite value, equally worthy of care and respect. We are committed to recruiting, enrolling and supporting a diverse student population, regardless of documentation and citizenship.

Institutional financial aid and scholarships are available for Undocumented, DREAMer & DACA students at Edgewood College. This application is for students who are neither US citizens nor permanent residents. Completion of the Free Application for Federal Student Aid (FAFSA) is not required or encouraged. Protecting student's privacy is very important to us. This information is for institutional use only and will only be used for financial aid purposes.

For student employment consideration only: Will you be eligible to work in in the US under Deferred Action for Childhood Arrivals (DACA) during the 25-26 academic year? Yes No Unsure

Student Information

Student Marital Status? Single Married/Remarried Separated/Divorced Widowed

Student - Total 2023 Income \$ _____

Student Current Balance of Cash, Checking, Savings \$ _____

Parent Information

Parent Marital Status? Single Married/Remarried Separated/Divorced Widowed

Parent 1 - Total 2023 Income \$ _____

Parent 2 - Total 2023 Income \$ _____

Parent(s) Current Balance of Cash, Checking, Savings \$ _____

Family Information

In the box below, list the people in your household, include:

- Yourself and your parent(s)
- Your parents' other children or other people if they live in your household and your parents will provide more than half their support from 07/01/2025 through 06/30/2026

Full Name	Age	Relationship	College Name (for any household member attending at least 1/2 time between July 1st, 2025, and June 30th, 2026, and will be enrolled in a degree, diploma, or certificate program)
Example: Martha Jones	20	Sister	Edgewood College
		Self	

Certification

By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct. At least one parent must sign if dependent. I will provide additional documentation if requested.

_____ Date _____

Student's Signature

_____ Date _____

Parent's Signature

Please return this completed form to:
 Edgewood Central
 Scan & email: ecentral@edgewood.edu;
 Fax: 608-663-3495 or
 Mail to: 1000 Edgewood College Drive,
 Madison, WI 53711