HARVARD
School of Dental Medicine

2026-2027 Preliminary Application for Financial Aid

Student Information:

Student Name _____

Social Security # xxx-xx-_____ OR HUID # _____

.Citizenship/Residency Status

I am a:

- U.S. Citizen
- Permanent Resident of the U.S.
- Non-Citizen Home Country:_____ Visa Type: _____

Anticipated Financial Aid Status

- **I consent** to receive all communications regarding my financial aid application electronically
- I **do not** plan on applying for financial aid for the 2026-27 academic year
- I **do** plan on applying for financial aid for the 2026-27 academic year
  - I will be submitting both the FAFSA and Profile applications
    - Please be aware that the Profile application is required in order to be considered for HSDM scholarship/grant funding. You can find the full application procedures at https://www.hsdm.harvard.edu/financial-aid.
  - I will be submitting the FAFSA only
    - Submitting the FAFSA alone will make you eligible for Federal student aid. However, you will **NOT** be considered for any HSDM grant/scholarship funds. In addition, you will not be considered for certain Federal loan programs.

Additional Funding

Please visit scholarships.harvard.edu and identify any funds for which you think you may be eligible:

Fund Name: _____

Fund Name: _____

Fund Name: _____

Office of Financial Aid
188 Longwood Ave., Boston, MA 02115 Phone: 617.432.1527 Fax: 617.432.3881
www.hsdm.harvard.edu

Additional Information

Do you intend to pursue a career in primary care? Yes No

Do you intend to pursue a degree in a specialty? Yes No

If yes, indicate the specialty in which you are interested

_____

Do you have in interest in pursuing additional degrees at Harvard University? Yes No

If yes, indicate the degree in which you are interested

_____

Do you have an interest in practicing in a medically underserved area or serving a medically underserved community? Yes No

Do you plan to serve in a rural community? Yes No

Financial Information

Have you previously borrowed a federal student loan (Federal Stafford Loan or Federal Perkins Loan)?

Yes No

If "yes", please indicate the amount of your outstanding federal loan(s)

$_____

Have you previously borrowed a student loan from a private lender (e.g. Sallie Mae SMART Option student loan)?

Yes No

If "yes", please indicate the amount of your outstanding private loan(s)

$_____

Signature_____ Date_____