



ENROLLMENT HANDBOOK

Spring 2019

WELCOME TO MEREDITH

Congratulations on your acceptance to Meredith! We are pleased to welcome you to the Class of 2023. When you join the Meredith community, you're choosing a community whose focus is you – your goals, your dreams, and how to use your unique strengths to reach those goals. What's the evidence that our students are reaching their goals? 92.2% of Meredith graduates are employed or in graduate school within a few short months of graduation. 96% of Meredith alumna tell us they would choose Meredith again!

As you consider your next steps, refer to this Enrollment Handbook as a resource for important deadlines, dates, and documents. You can also find the handbook at meredith.edu/admitted. Get to know us! Visit campus and spend some time in our close knit community. And always, reach out at (919) 760-8581 or admissions@meredith.edu with questions or comments. We enjoy hearing from you.

Going Strong,
The Office of Admissions

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IMPORTANT CONTACT INFORMATION (Administrative Offices)

Accounting accounting@meredith.edu (919) 760-8363	Enrollment knottdon@meredith.edu (919) 760-8009
Academic Advising advising@meredith.edu (919) 760-8341	Financial Assistance finaid@meredith.edu (919) 760-8565
Admissions admissions@meredith.edu (919) 760-8581	Health Center healthcenter@meredith.edu (919) 760-8535
Campus Chaplain dcbattle@meredith.edu (919) 760-8346	International Programs/Study Abroad studyabroad@meredith.edu (919) 760-8429
Campus Police awhite@meredith.edu (919) 760-8888	Orientation fye@meredith.edu (919) 760-8521
Career Planning career@meredith.edu (919) 760-8341	Parking creechc@meredith.edu (919) 760-8888
College Programs jacksonj@meredith.edu (919) 760-8556	Provost's Office provost@meredith.edu (919) 760-8514
Commuter Life sloaneto@meredith.edu (919) 760-8521	Registrar's Office registrar@meredith.edu (919) 760-8594
Continuing Education graduate@meredith.edu (919) 760-8583	Residence Life reslife@meredith.edu (919) 760-8633
Counseling Center counseling@meredith.edu (919) 760-8427	StrongPoints® strongpoints@meredith.edu (919) 760-8341
Dean of Students gleasona@meredith.edu (919) 760-8521	Student Leadership studentactivities@meredith.edu (919) 760-8338
Dining Services campusdining@meredith.edu (919) 760-8377	Supply Store (Text Books) reesem@meredith.edu (919) 760-8545
Disability Services disabilityservices@meredith.edu (919) 760-8427	Technology Services techserv@meredith.edu (919) 760-2323
Diversity Programs sloaneto@meredith.edu (919) 760-8521	

ENROLLMENT CHECKLIST

First-Year Candidates

✓Checklist

- **OCTOBER 1** Free Application for Federal Student Aid (FAFSA) opens. All students and families are encouraged to submit the FAFSA to receive maximum funding options. Submit your FAFSA early, www.fasfa.gov. Non U.S. Citizens should submit Meredith's Institutional Aid Application found at meredith.edu/financial-assistance.
- **NOVEMBER 1 OR EARLIER** Priority deadline for receipt of financial aid applications; FAFSA for U.S. Citizens, Institutional Aid Application for non U.S. Citizens. Applications received after this deadline will be considered on a funds available basis.
- **DECEMBER 1** \$300 non-refundable deposit due to the Office of Admissions (see form on page 5).
- **DECEMBER 1** Photography Release, Housing Request and Student Medical Forms due to the Office of Admissions (complete the forms on pages 6, 7, 9-12). Online Insurance Waiver is available and should be completed if you currently maintain health insurance and wish to opt out of purchasing Meredith's policy. (See information on page 13).
- **DECEMBER 1** Spring tuition and room and board, if applicable, is due. A bill will be emailed to you in November at your Meredith email address. Students utilizing Meredith's payment plan will also make their first payment on December 1.
- **JANUARY 1** (or earlier) Final high school transcript should be received.
- **JANUARY 7-8** New student orientation – as a new student you'll learn valuable information for making a successful transition to Meredith. As new students are required to attend.

Transfer Candidates

✓Checklist

- **OCTOBER 1** Free application for Federal Student Aid (FAFSA). All students and families are encouraged to submit the FAFSA to receive maximum funding options. Submit your FAFSA early. Non U.S. Citizens should submit Meredith's Institutional Aid Application found at meredith.edu/financial-assistance.
- **NOVEMBER 1 OR EARLIER** Priority deadline for receipt of financial aid applications (FAFSA). Applications received after this deadline will be considered on a funds available basis.
- **NOVEMBER - DECEMBER** Pre-registration advising conferences are arranged with faculty in the major department.
- **DECEMBER 1** \$300 non-refundable deposit due to the Office of Admissions (see form on page 5).
- **DECEMBER 1** Photography Release, Housing Request and Student Medical Forms due to the Office of Admissions (complete the forms on pages 6, 7, 9-12). Online Insurance Waiver is available and should be completed if you currently maintain health insurance and wish to opt out of purchasing Meredith's policy. (See information on page 13).
- **DECEMBER 1** Spring tuition and room and board, if applicable, is due. A bill will be emailed to you in November at your Meredith email address. Students utilizing Meredith's payment plan will also make their first payment on December 1.
- **JANUARY 1** Official transcript of fall courses, if any, should be received.
- **JANUARY 7-8** New student orientation – as a new student you'll learn valuable information for making a successful transition to Meredith. As new students are required to attend.



ADVISING & REGISTRATION

Attention Incoming First-Year Students

Students who have submitted their enrollment deposit will be emailed information beginning in late November about the advising and course registration process. All new incoming first-year students will take appropriate placement tests online and will meet with faculty advisers and register for classes during orientation.

Attention Incoming Transfer Students

Upon admission to Meredith College, and payment of the deposit, Academic Advising will contact you to assist in scheduling your pre-registration advising conference. Transfer students will meet individually with faculty in their major for advising while undecided transfer students will meet with Academic Advising staff. Transfer students may register for courses at anytime after the advising conference.

REQUIRED ORIENTATION FOR ALL NEW STUDENTS

New student orientation begins January 7. As you make plans to enroll at Meredith, remember that students living on campus will move into the residence halls on the day that orientation begins. New students and their families will have orientation sessions on January 7 and 8. You will receive orientation information in December. Orientation is a great time to make friends and become acquainted with campus life. You will spend much of orientation with your student adviser and have an opportunity to connect with your academic adviser – important people who will be your guides as you attend activities designed to prepare you for success at Meredith. Special activities are planned to meet the needs of residential, commuter, freshmen, and transfer students.

RESIDENCE LIFE

National research informs us that living on campus can lead to increased opportunity for student success. That's why all first - year students under the age of 23 are required to live on campus for their first two years at Meredith unless they commute from the home of their parents. With special permission students may reside with another close relative.

The Residence Life staff provides services that enrich the quality of life for Meredith students. Community building opportunities for intellectual, physical, social, emotional, spiritual and professional growth are a part of this living/learning environment. Listed to the right is important residence hall information. Please complete and return the Housing Request Form (see page 7) as soon as possible, but no later than December 1.



RESIDENCE HALL INFORMATION

- Room and board fees cover all utilities, internet access, services in the Health Center and a full meal plan.
- Room assignment letters are mailed the 1st week of July.
- Washers and dryers are available in every residence hall. The cost of laundry is included in room and board fees.
- Parlors are located on each floor of the residence hall for the enjoyment and use of each resident.
- Microwaves are available on each floor.
- Students are allowed to have one refrigerator per room (4.5 cubic feet maximum).
- Each student is provided a standard twin-size bed, dresser, desk, chair and closet. Each room has a full-length mirror.
- All student rooms are wired for cable television. Televisions need to be HD ready.
- Each student needs to bring her own bedding, including mattress cover and pillow. Mattress size is standard twin.
- Ironing boards are provided for students to use. Students must supply their own irons, which may be used in the ironing/laundry room and stored in their room.
- Extension cords are not allowed. Students may use power strips that have a circuit breaker.
- All residence halls are air conditioned.
- Drink and snack machines are available in the residence halls.
- Most freshmen rooms measure approximately 11' x 16'. More specific room information is available on the Residence Life website, meredith.edu/student-life/residence-life.
- Each room has a pair of windows with adjustable blinds.
- Resident rooms, with the exception of 4th floor rooms, are suite-style rooms. Suites are two double rooms joined by a bathroom, which is shared by all four residents.

NEW STUDENT PARKING INFORMATION

- Freshmen are permitted to have cars on campus. Parking on campus is by permit only. New students should register for a parking decal by completing and submitting the parking agreement form and vehicle registration, meredith.edu/campus_police. Parking permit applications are due by first day of classes. Students may also call Parking Services at (919) 760-8888.

LIFE ON CAMPUS

Meredith will be your new home away from home. Listed here are some of the services available to you – for more information, visit meredith.edu/current-students.

CAMCARDS

The CamCard is a student identification card, a debit card, a meal card and a residence hall entrance card. To use the CamCard as a debit card, the student applies money to her student account. She may then use the CamCard for purchases in the Beehive, vending machines, and for making photocopies.

FOOD SERVICES

Commuting students may apply cash to their accounts and use the CamCard to purchase meals in the dining hall and Beehive or they may purchase a commuter meal plan.

HEALTH SERVICES

Carroll Health Center provides confidential health care services by appointment including: clinical health care for minor illnesses (major illnesses are referred off campus or to family physicians), minor emergency care, health consultations, health promotion and disease prevention. Residential fees for residential students cover costs of services in Meredith's Health Center. Commuter students pay the Health Center fee, \$100 per semester, to receive services.

COUNSELING CENTER

The Counseling Center provides a safe place for students to talk with licensed, professional counselors about a variety of unique challenges that college students may face. All services are free, confidential, and include: individual short-term counseling, crisis services, psychological consultation, resources and referral, and disability services.

POSTAL SERVICES

Located in Cate Center, the center provides an array of services including mail boxes, package mailing and delivery pick-up, and stamps.

CAMPUS SAFETY

Campus police and security officers provide safe surroundings for students and their property. Police officers have full law enforcement authority on College property. Officers regularly patrol campus to ensure physical security and provide security and access to campus facilities. Access to campus is controlled after 11 p.m. Residence halls are equipped with automatic door locks which must be activated by student CamCards upon entry. Although Meredith provides these services, each student assumes responsibility for her safety.

ACADEMIC AFFAIRS AND STUDENT SERVICES

Meredith offers a wide range of services to assist each student in developing her various capabilities. These academic and personal development experiences are coordinated under the leadership of academic programs and college programs.

STUDENT TECHNOLOGY

Student Technology provides a wide range of services including: wireless connectivity, campus printing, antivirus and productivity software, computer labs, access to other campus technologies. Access to a laptop computer is recommended. Students should use printing and copying services on campus rather than bringing a printer to campus; color & black and white printers are in common areas across campus. Wireless printers are not allowed in the residence halls because they interfere with wifi signal.

OFF-CAMPUS SERVICES

A shopping center located behind campus provides quick access to a grocery store, drug store, restaurants, and other shopping. The Capital Area Transit bus service makes regular stops at the entrance to campus.

FINANCIAL SERVICES

Meredith is committed to partnering with students to make education affordable. For more information, visit meredith.edu/financial-assistance.

FINANCIAL ASSISTANCE

To be considered for state, federal, and Meredith's need-based financial assistance, you must complete the Free Application for Federal Student Aid (FAFSA) at FAFSA.ed.gov. Be sure to indicate our school code #002945 on the form.

Non U.S. citizens who are ineligible to complete the FAFSA should submit Meredith's Institutional Aid Application to be considered for need-based aid, scholarships, and campus work study.

The FAFSA opens on October 1 of each year. Submit the FAFSA (U.S. Citizens or eligible non-

citizens) early. The priority date for the FAFSA is February 15. The priority date for the Institutional Aid application (non U.S. citizens) is also February 15. Aid applications submitted after this date are considered on a funds available basis. Apply for aid early at meredith.edu/financial-assistance.

TUITION AND MONTHLY PAYMENT PLAN

Notification that tuition is due will be emailed to your Meredith email address in early July. The full cost for fall semester tuition, fees, and room and board (if applicable) is due on August 1. Students utilizing Meredith's payment plan will make their first semester payment in July.

To utilize Meredith's payment plan, please see more information at www.meredith.edu/accounting-department and select Billing and Payments.

LOAN OPTIONS

Student loans can be used to cover any educational expenses not covered by other forms of financial aid. Please review additional information at meredith.edu/financial-assistance and select Loans.

Raleigh, North Carolina

Deposit Form

Your \$300 non-refundable deposit* is due as follows:

- On December 1 (or by the date specified in your acceptance letter if you have been admitted later than November 22).
- Deposits can be made electronically by check, or by money order

** This \$300 deposit must be received in the Office of Admissions to properly credit your account.*

To help reflect the payment in your records correctly, please do the following:

1. Provide all information requested on this form.
2. Attach a check or money order payable to Meredith College.
3. Mail the form and attached check or money order to:

Meredith College
Office of Admissions
3800 Hillsborough Street
Raleigh NC 27607-5298

4. To pay by credit card, see instructions at meredith.edu/admitted. If paid by credit card, it is not necessary to mail this form to the Office of Admissions. Note: \$5 processing fee will be added to credit card payments.

If you are enrolling as a resident student, the payment serves as a room deposit; if as a commuting student, your deposit places your name on the list of students eligible to register. The payment is non-refundable but will apply toward your fees for the first semester of enrollment.

Please complete the following:

Name _____

Mailing Address _____

City/State/ZIP _____

Email _____ Telephone # _____

Residence Status: Residence Hall Commuting

Intended Term of Entrance: January

Classification: Freshman Transfer Re-Admit

Photography Release Form

*Photographers and videographers will be photographing and filming Meredith College students', guests' and visitors' activities **throughout students' undergraduate and graduate years.** The photos and videos may be used in various Meredith publications and presentations, including brochures, advertisements, magazines, newspapers, and online features, to promote Meredith and its programs and events.*

By signing below, I hereby voluntarily and irrevocably grant to Meredith College, its officers, employees, trustees, faculty, licensees, successors and assigns (collectively "Meredith") the right to (1) take or use any and all photographic images, video or audio recordings and/or multi-media that may contain my name, image, likeness, voice, and statements (collectively, "Photos"); and (2) use, re-use, copy, modify, adapt, distribute, publish, display, perform, exhibit, create derivative works from and otherwise exploit such Photos in perpetuity, in any media, by any means, methods and technologies now or hereafter known, including by posting on the Internet, for Meredith's educational, marketing, promotional, and other business purposes.

I understand and agree that the Photos may be used with or without identifying me, or any other form of attribution and that I will receive no payment or other consideration for posing or allowing Meredith to use the Photos.

I hereby voluntarily waive any and all rights to inspect or approve use, distribution, transfer, display or other exploitation of the Photos, and to any royalties, proceeds or other benefits derived from the Photos.

I hereby voluntarily release and discharge Meredith from, and shall neither sue nor bring any other proceeding against Meredith for, any claim or cause of action, for defamation, violation of any moral rights, invasion of right to privacy, publicity or personality or any similar matter, or based on or relating to any use, publication, distribution or other exploitation of the Photos.

This release is effective on the date written below and will remain in effect indefinitely unless otherwise agreed in writing by Meredith or me. This release is also voluntary, and my failure to sign and deliver it to Meredith will not impact my enrollment status..

If you are (i) under 18, (ii) under 19 and a resident of Alabama or Nebraska, (iii) under 21 and a resident of Mississippi, or (iv) under the age of majority in your country of residence, a parent or legal guardian must also read and sign this release.

By signing below, I represent that I have read and understand the contents of this Release.

Signature

Parent/Legal Guardian Signature

Printed Name

Printed Name/Relationship

Date

Date

Return your completed form to the Office of Admissions:

admissions@meredith.edu; fax 919-760-2348; or The Office of Admissions, 3800 Hillsborough St., Raleigh, NC 27607

**Upon completion
return form to:**
Meredith College
Office of Admissions
3800 Hillsborough Street
Raleigh, NC 27607-5298
or email to admissions@meredith.edu

Housing Request Form

Dear Incoming Student,

Please complete and return this form by **December 1, 2018** to request housing. Requests received after December 1 will be processed based on housing availability. Print clearly and sign the back of the form before returning it. Completed forms may be mailed or faxed to the Office of Admissions at (919) 760-2348. If you have any questions, please contact the Office of Residence Life at reslife@meredith.edu, or (919) 760-8633.

—The Residence Life Staff

Please check one: **First-Year** | **Transfer**
Anticipated classification
_____ | **Re-Admit**
Anticipated classification

Residence Hall | Residence Hall

Oaks Apartments | Oaks Apartments

For Office Use Only: Student ID#: _____ Room Assignment: _____

Please complete the following:

Name _____
Last First Middle Preferred Name

Date of Birth _____ Area of Academic Interest _____

Home Address _____
Street City State ZIP

Home Phone _____ Cell Phone _____

Email _____

Father/Guardian _____

Home Phone _____ Cell Phone _____

Mother/Guardian _____

Home Phone _____ Cell Phone _____

Housing Request Form (continued)

Student name _____

Designate roommate preference.

Note: only mutual roommate requests will be honored.

Requested roommate's name _____

Requested suitemate(s) name(s) _____

Please complete the following, even if you are requesting a roommate: (Check only one preference for each pair)

My Preferred Roommate Characteristics:

- Goes to bed early (before midnight)
Stays up late (after midnight)
Non-smoker
Smoker
Neat
Messy
Studies in quiet
Studies with music/TV on

My Personal Characteristics:

- Go to bed early (before midnight)
Stay up late (after midnight)
Non-smoker
Smoker
Neat
Messy
Studies in quiet
Studies with music/TV on

Interests:

- Performing Arts
Sports (playing, watching)
Volunteering
Leadership Opportunities
Technology (digital pictures, facebook)
Movies
Crafts (scrapbooking, etc.)

Music type(s) _____

Other hobbies or interests _____

Intended major(s) _____

Please list any health concerns or special needs that should be considered when assigning you to a room. If you need to request special accommodations because of a disability, please contact Disability Services at (919) 760-8427 or disabilityservices@meredith.edu. See page 15 for information.

Three horizontal lines for listing health concerns or special needs.

By signing below, I am confirming that I, the student, completed this Housing Request Form. I understand that the Residence Life staff will use this information when making room assignments.

Student signature _____ Date _____

Meredith College does not house students based on race, creed, sexual orientation, national or ethnic origin, age or disability.

Student Medical Form (pages 9-12)

Instructions for Completing Medical Form

NOTE: The deadline for submission of the Student Medical Form is December 1. Students will be withdrawn from the College 30 days after classes begin if immunization requirements have not been met and the Student Medical Form has not been returned to the Office of Admissions. Please submit pages 13-16 together after all forms are complete.

READ CAREFULLY

1. **Complete pages 10 and 11 of the form and as much of the section on page 12 as you can before visiting your physician.**
 - Records must be documented in black ink and all corrections must be signed.
 - All immunization dates must include month, day and year of administration.
2. **Make sure to read page 14 concerning meningococcal disease and new vaccine recommendation(s).**
3. **Ask your physician or your county health department to bring your immunizations and tuberculin skin test up to date if necessary. Please refer to www.immunize.nc.gov/schools for more information regarding state requirements. Keep in mind that:**
 - All **required** immunizations listed are mandatory for enrolling at Meredith;
 - A **tuberculin skin test** within 1 year prior to your enrollment at Meredith is also required. Please have your tuberculin skin test read before submitting this form.
 - Immunizations that are required pursuant to NC state law:
 - All students: Three doses of Tetanus/Diphtheria toxoid; one of which must be Tetanus/Diphtheria/Pertussis.
 - Students born in 1957 or later: 2 Measles (Rubeola), 2 Mumps, 1 Rubella
 - Students born before 1957: 2 Measles (Rubeola) and 2 Mumps or proof of immunity by titer with lab report. Rubella is NOT required for students 50 years of age or older.
 - Students under the age of 18: Polio series
 - Students born after 7/1/1994: 3 Hepatitis B doses
 - If immunizations are unavailable, you may submit a titer for proof of immunity, attach with the lab report.
 - Immunizations records can be obtained from:
 - Your pediatrician's or family physician's office
 - Your high school transcript
 - The local department of health
 - Records from previous college/university
 - For more information on how to obtain vaccine records please visit:
CDC: <http://www.cdc.gov/vaccines/recs/immuniz-records.htm>
4. **Ask your physician to review the information you provided and to complete and sign the remainder of the form. Make sure that he/she:**
 - Reviews the immunization history and updates all necessary immunizations.
 - Signs the bottom of page 16 certifying that your medical history, immunizations, Tb skin test and physical examination are complete.
 - Students who plan to play intercollegiate sports must have their physical dated after April 30.
5. **Transfer students must complete pages 10 and 11 of this form. Students must either complete page 12 or may request and forward copies of your physical exam, immunizations, and tuberculin skin test from the former institution (updates may be required).**
6. **All full-time undergraduate students must complete the insurance waiver online (See page 13)**
7. **Check your medical form for completion, sign page 11 and mail all pages together to the address above by December 1.** Questions regarding this form should be directed to Health Services at (919) 760-8535, or healthcenter@meredith.edu.

Raleigh, North Carolina

Student Medical Form (continued) Report of Medical History

IMPORTANT: Pages 10-12 must be completed, returned to the College and found complete by Health Services before you can register for classes. Information supplied will be used as an aid in providing necessary care while you are a student. The information is strictly for the use of Health Services and will not be released to anyone without your knowledge and written consent. **REFER TO THE CHECK LIST ON PAGE 12**

Last Name (print) _____ First Name _____ Middle Name _____ Last four digits of Social Security Number _____

Permanent Address _____ City _____ State _____ ZIP _____

Area Code/Telephone _____ Date of Birth (mo/day/yr) _____ Age _____

Cell phone (student) _____ Student's email (please print) _____

Marital Status: S M Other _____ Class You are Entering: FR SO JR SR _____

Previously Enrolled Here: Yes No _____ Semester Entering: Fall Spring Year 20____ _____

Hospital/Health Insurance (Name and Address of Company) _____ Subscriber/Policy Number _____

Name of Policy Holder _____ Employer _____

Name of Person to Contact in Case of an Emergency _____ Relationship _____

Address _____ (Home) Area Code/Telephone _____ (Work) Area Code/Telephone _____

(Cell) Area Code/Telephone _____ Emergency Contact Email _____

Family & Personal Health History

The following health history is confidential, does not affect your admission status and, except in an emergency situation or by court order, will not be released without your written permission. Please attach additional sheets for any items that require more explanation.

Has any person, related by blood, had any of the following:

	Yes	No	Relationship		Yes	No	Relationship		Yes	No	Relationship
High blood pressure				Cholesterol or				Blood or clotting disorder			
Stroke				blood fat disorder				Alcohol/drug problems			
Cancer (type: _____)				Diabetes				Psychiatric illness			
Heart attack before age 55				Glaucoma				Suicide			

Have you ever had or do you have now: (please check at right of each item and if yes, indicate year of first occurrence)

	Yes	No	Year		Yes	No	Year		Yes	No	Year		Yes	No	Year
High blood pressure				Hay fever				Frequent vomiting				Back injury			
Rheumatic fever				Head or neck radiation				Gall bladder trouble or				Broken bones			
Heart trouble				treatments				gallstones				Kidney infection			
Pain or pressure in chest				Arthritis				Jaundice or hepatitis				Bladder infection			
Shortness of breath				Concussion				Rectal disease				Kidney stone			
Asthma				Frequent or severe				Severe or recurrent				Protein or blood in urine			
Pneumonia				headache				abdominal pain				Hearing loss			
Chronic cough				Dizziness or fainting spells				Hernia				Sinusitis			
Tuberculosis				Severe head injury				Easy fatigability				Severe menstrual cramps			
Tumor or Cancer (specify)				Paralysis				Anemia or Sickle Cell Anemia				Irregular periods			
Malaria				Epilepsy/Seizures				Eye trouble besides				Blood transfusion			
Thyroid trouble				Disabling depression				need for glasses				Smoke 1+ pack			
Serious skin disease				Excessive worry/anxiety				Bone, joint or other deformity				cigarettes/week			
Alcohol/drug abuse				Ulcer (duodenal or stomach)				Shoulder dislocation				Diabetes			
Sexually transmitted				Intestinal trouble				Knee problems				Anorexia/Bulimia			
disease				Pilonidal cyst				Recurrent back pain				Allergy injection therapy			
Mononucleosis				Self-induced vomiting				Neck injury				Chickenpox (Disease)			

Student Medical Form (continued)

(Family & Personal Health History continued)

Student Name _____
 Last Name First Name Middle Name

Please describe any conditions or disabilities that would exclude participation in physical activities:

Please list all medications including those used for contraception, vitamins and minerals (prescription and nonprescription) you use and indicate how often you use them.

Brand Name	Use	Dosage	Brand Name	Use	Dosage

Check each item "Yes" or "No." Every item checked "Yes" must be fully explained in the space on the right (or on an attached sheet). Have you ever experienced adverse reactions (hypersensitivities, allergies, upset stomach, rash hives, etc.) to any of the following? If yes, please explain fully the type of reaction, your age when the reaction occurred and if the experience has occurred more than once.

Adverse Reaction to:	Yes	No	Please explain
Penicillin			
Sulfa			
Other antibiotics (name)			
Aspirin			
Codeine or other pain relievers			
Other drugs, medicines, chemicals (specify)			
Insect bites			
Food allergies (name)			

	Yes	No	Please explain
Have you ever been a patient in any type of hospital? (Specify when, where and why.)			
Has your academic career been interrupted because of physical or emotional problems? (Please explain.)			
Is there loss or seriously impaired function of any paired organs? (Please describe.)			
Other than for a routine check-up, have you seen a physician or health-care professional in the past six months? (Please describe.)			
Have you ever had any serious illness or injuries other than those already noted? (Specify when, where and give details.)			

Important Information — Please read and complete

STATEMENT BY STUDENT: I have personally supplied the above information and attest that it is true and complete to the best of my knowledge. I hereby authorize medical treatment which may be advised or recommended by the medical personnel of the Student Health Services of Meredith College. If serious illness of any kind requires hospitalization, emergency treatment or major surgery, I understand that my parents or guardian will be contacted by telephone if at all possible. If they cannot be reached, emergency treatment may be given as necessary for my well-being.

Signature of Student _____ Date _____ Signature of Parent or Guardian *(if under 18 years of age)* _____

Student Medical Form (continued)
Report of Health Evaluation

STUDENT MEDICAL FORM ✓ Checklist

- Ensure all required immunizations are listed (according to NC State law)
- Make sure the physician completes and signs the physical exam form, page 12
- Make sure your Tuberculin (PPD) test is current (within 12 months)
- Complete the insurance waiver process online. See page 13
- Read about meningococcal disease and vaccine. See page 14
- Make a copy of pages 10-12 for your records

Last Name First Name MI Date of Birth

Immunizations—ALL students must complete (*If Titers are necessary, please attach lab report)

Vaccine	Series Date	Series Date	Series Date	*Titer Date
DTP (Date of series required)	#1	#2	#3	
Tdap (Booster within ten years required)				
Polio (required if under 18 years of age)	#1	#2	#3	
Hepatitis B (required if born after 7/1/94)	#1	#2	#3	
Measles (Rubeola) on or after 1st birthday	#1	Booster required: #2		
Mumps	#1	Booster required: #2		
Rubella (German measles)	#1			
Meningococcal (recommended) See page 18				
Gardasil - HPV (recommended)	#1	#2	#3	
Varicella/Chicken Pox (recommended)	#1	#2		

The North Carolina Immunization Law requires that students entering college present to the school authorities immunization certification.

Please note that if this requirement is not met, dismissal from school 30 days after registration is mandatory under the law.

Please Do Your Part to make sure you have the minimum immunizations required before sending in your form. Refer to www.immunize.nc.gov/schools.

Tuberculin (PPD) Test (required within 12 months)	Date given Date read	Required Results
Chest x-ray, if positive PPD	Date	mm induration
Treatment, if applicable	Date	Results - Attach copy of the report

Verified by Physician or Health Department Stamp (Mandatory) _____ Date _____

Physical Examination (All students under age 23, including transfers):

TO THE EXAMINING PHYSICIAN: Please review the student's medical history, immunization history, proof of PPD, and then complete the examination and general comments portion of this form.

Height _____ Weight _____ BP _____ Pulse _____ Temp. _____
 Vision R 20/ _____ L 20/ _____ Corrected _____ Hearing (Gross) R _____ L _____

Are there abnormalities of the following systems?

System	Yes	No	System	Yes	No
1. Head, Ears, Nose, Throat			9. Musculoskeletal		
2. Eyes—Fundi			10. Metabolic/Endocrine		
3. Respiratory			11. Neurological		
4. Lymphatic			12. Skin		
5. Cardiovascular			13. Psychiatric		
6. Gastrointestinal			Describe fully.		
7. Hernia					
8. Genitourinary					

General Comments (diagnosis, recommendation, etc.)

Physical Activity? Unlimited Limited

Explain: _____

Is this student now under treatment for any medical and/or emotional condition? Yes No

Explain: _____

Print Name of Physician, Physician Assistant or Nurse Practitioner _____ Date _____ Signature of Physician, PA or NP _____

Office address _____ Area Code/Office Telephone _____

Health Insurance Waiver

Meredith College values the health and welfare of its students. To serve the health needs of our student community, **Meredith requires health insurance as a condition of enrollment** for all full-time undergraduate (12 credit hours or more), licensure only, pre-health, international, Sansepolcro students, and dietetic interns to assure that students have access to health care services beyond what is available on campus.

Students who have health insurance:

- If you have health insurance and wish to opt out of the plan that Meredith College offers, complete the waiver at meredith.edu/health. You will receive an email confirmation in 1-3 business days.
- The waiver will be available starting in mid-November. If this form is not completed by **Wednesday, January 23, 2019 at 5 p.m. EDT** your student account will automatically be charged for the insurance plan Meredith is offering. See meredith.edu/health for more details.

Students who do not have health insurance:

- Purchase a health insurance policy and complete the waiver at meredith.edu/health. You can find your own policy through the health care exchange (healthcare.gov) or enroll in Meredith's BlueCross Blue Shield of North Carolina (BCBS-NC) plan (meredith.edu/health). The waiver will be available starting in June. The waiver form needs to be completed by **Wednesday, January 23, 2019 at 5 p.m. EDT** or your account will be charged for the insurance plan Meredith is offering;
- Enroll in the Meredith BCBS-NC Plan before **Wednesday, January 23, 2019 at 5 p.m. EDT** Your student account will be charged on your semester bill.

Students should check with their insurance provider to confirm that coverage is appropriate for Raleigh, North Carolina and is comparable to our current plan.

Some Factors to Consider in Evaluating Your Current Health Insurance Plan:

1. Does your health insurance plan provide medical benefits for you while at Meredith in Raleigh, North Carolina?
2. Does your current plan provide benefits from August 1, 2019 – July 31, 2020?

Summary of Meredith's Current 2018-19 Plan

Insurance Carrier: BlueCross BlueShield of North Carolina

Benefit Period: This plan provides benefits to students from August 1, 2018 through July 31, 2019.

Cost of Plan: \$247/month - the charges for the current benefit period August 1, 2018 – July 31, 2019 are \$1,234 for fall and \$1,726 for spring/summer.

To view the current benefit summary for Meredith's plan for the 2017-18 academic year, please go to meredith.edu/studenthealthinsurance.

Important Information about Meningococcal Disease

Neisseria meningitidis is the bacterium responsible for meningococcal disease. This particular bacterium can live unnoticed in individuals (“carrier state”) with no symptoms. Occasionally, the bacteria will invade the bloodstream or other body tissues and cause meningococemia, meningitis, pneumonia or pharyngitis (sore throat). Individuals who have had close, intimate contact with a “carrier” or with an individual who has one of these illnesses may become infected with the bacteria also. Even if treated promptly, meningococcal disease may progress rapidly and cause serious medical problems including death.

Meningococcal disease incidence has decreased since 2000, and incidence for serogroups C and Y, which represent the majority of cases of vaccine-preventable meningococcal disease, are at historic lows. However, the peak in disease among persons aged 18 years has persisted, even after routine vaccination was recommended in 2005. Freshmen, particularly those who live in residence halls, constitute a group at modestly increased risk of meningococcal disease relative to other persons their age. (Other undergraduate students wishing to reduce their risk of meningococcal disease can also choose to be vaccinated.)

There are two vaccines against *N. meningitidis* available in the United States, Menveo by Novartis; and Menactra by Sanofi Pasteur. Both vaccines can help to prevent 4 types of meningococcal disease (types A, C, Y, and W-135).

There are two serogroup B meningococcal vaccines that have been licensed by the Food and Drug Administration (FDA): Bexsero® and Trumenba®. These vaccines are recommended routinely for people 10 years or older who are at increased risk for serogroup B meningococcal infections.

These vaccines may also be given to anyone 16 through 23 years old to provide short term protection against most strains of serogroup B meningococcal disease; 16 through 18 years are the preferred ages for vaccination. For best protection, more than 1 dose of a serogroup B meningococcal vaccine is needed. The same vaccine must be used for all doses. Ask your health care provider about the number and timing of doses.

For more information on Meningococcal Disease, please go to the CDC website at <http://www.cdc.gov/meningitis/bacterial.html>.

A Meredith student who chooses to receive the vaccine should get it from their family physician or local health department. The vaccine is available at Wake County Department of Health and Human Services.

MENINGOCOCCAL VACCINE RECOMMENDATION, as of May 10, 2016

Most students received one meningococcal vaccine at age 11 or 12. Originally this was thought to provide protection to students throughout their high school and college years. Recent research has found that persons immunized at age 11 or 12 might have decreased protective immunity by ages 16 – 21 years, when their risk for disease is greatest.

Meningococcal Meningitis Vaccine Booster: A booster dose is now recommended for those 16 years of age who received the initial dose at age 11-12. If the initial dose was given at 13-15 years, the booster dose should be given at 16-18 years of age. If the initial dose was given age at 16 years or older, no booster is needed, except where there is continuing risk. **Beginning in July 2020, an additional booster for 12th graders will be required by the state of North Carolina.**

Please check with your physician to see if a meningitis booster is needed before coming to Meredith.

For more information on this latest recommendation please refer to the following CDC web address.
<http://www.cdc.gov/vaccines/vpd-vac/mening/default.htm>

For confidentiality purposes, upon completion please return separately to:

Meredith College
Disability Services
208 Carroll Hall
3800 Hillsborough Street
Raleigh, NC 27607

Voluntary Disability Disclosure and Request for Accommodation

Meredith College is committed to creating an accessible community and providing reasonable accommodations to qualified students. We respect your right to confidentiality and allow you to choose whether or not to disclose your disability and accommodation needs. In a college setting, the student is responsible for initiating the eligibility process and requesting accommodations. Prior to your arrival at Meredith, send the materials requested below to Disability Services so that your accommodations will be in place when you need them.

The needs of individuals with disabilities vary; therefore, we provide a number of support services to students who qualify and are certified with Disability Services. Accommodations and support services are determined on a case-by-case basis. If you have a learning disability, ADHD, hearing or vision impairment, mobility problem, health concern (seizures, diabetes, depression, etc.), or another condition that requires accommodations, please submit the materials requested below.

1. The Voluntary Disability Disclosure and Request for Accommodations (opposite side of this page).

2. Documentation of the disability from an appropriate licensed/certified professional. For more specific information about the criteria for documentation, view our Documentation Guidelines online by visiting meredith.edu/disability and selecting the "Certification Process."

3. In general, documentation must include the following standard requirements:

- Professional credentials of the evaluator (including licensures and areas of specialty) on official letterhead
- A clear diagnostic statement
- A complete educational, developmental, and relevant medical history
- Identification of the tests and techniques used to arrive at the diagnosis of the disability
- Description of the functional limitations resulting from the disability
- Specific accommodation recommendations
- A detailed explanation of why the disability qualifies the applicant for accommodations

Please submit this form as soon as possible so that Disability Services can begin processing your request for accommodations.

If you require accommodations for admissions, enrollment and/or advising events, please return this form no later than two weeks prior or contact Counseling Center/Disability Services at (919) 760-8427 or email disabilityservices@meredith.edu

Please complete the opposite page and return it to:

Meredith College
Disability Services
208 Carroll Hall
3800 Hillsborough St.
Raleigh, NC 27607

Alternate formats available on request.

Raleigh, North Carolina

Voluntary Disability Disclosure and Request for Accommodation (continued)

Please complete and submit this form by November 1. Late forms will be accepted.

Full name _____ Social Security number (last four digits only) _____

Phone # _____ Email address _____

Address _____

Street

City

State

ZIP

Please check one: First-Year Transfer Re-Admit

What semester are you planning to begin at Meredith? Fall Spring Summer

What is your disability? (Give specific diagnosis: learning disability, ADHD, mobility, health, etc.)

How does this disability affect your academic and/or classroom experience?

What, if any, residence hall accommodations, are requested because of your disability? Housing accommodation requests must be submitted by November 1, 2018.

What accommodations have you received in the past?

Information regarding your disability will be treated confidentially and cannot be disseminated without a signed release from you. By checking "Yes" below and signing this form, you give us permission to share information concerning your needs with campus professionals who "need to know" (such as academic advisors and disability counselors). This will NOT release information to your future faculty. A separate release form must be completed **each semester** to communicate information with faculty or other members of the campus community regarding your disability and accommodations.

Yes, I am requesting disability services and understand I must provide appropriate documentation.

Student Signature _____ Date _____

Parent Signature (if student is under 18 years of age) _____ Date _____

WHAT MAKES US STRONG.

Chartered in 1891, Meredith College is one of the largest independent private women's colleges in the U.S. Meredith also offers coeducational graduate programs in business, education, nutrition, and psychology, as well as post-baccalaureate certificate programs in pre-health and business, a dietetic internship program, and a paralegal program.

Rankings: Meredith College is nationally ranked as a top-tier liberal arts college by *U.S. News & World Report*, and one of the "Best Colleges in the Southeast" according to *The Princeton Review*.

Majors, minors and concentrations: Over 80

Location: Raleigh, North Carolina

Enrollment: 1,981 including 296 graduate students. Students come from 33 states and 38 countries.

Multicultural students: 23%

2

MEREDITH IS ONE OF ONLY TWO WOMEN'S COLLEGES IN THE WORLD ACCREDITED BY THE ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS.

Over 95

PERCENT OF OUR STUDENTS PARTICIPATE IN INTERNSHIPS, UNDERGRADUATE RESEARCH OR ANOTHER KIND OF EXPERIENTIAL LEARNING.

Student/faculty ratio: 12:1

Average class size: 17

Faculty: 133 full-time teaching faculty members. 86% of full-time professors hold doctoral or terminal degree in their field.

Internships: Recent placements include Credit Suisse, Lenovo, RTI International, SAS, and Michael Kors, and too many others to list.

Student clubs and organizations: Over 100

First-Year Students who receive financial assistance: Over 95%

32

PERCENT OF MEREDITH STUDENTS STUDY ABROAD. (COMPARE THAT TO A 10% NATIONAL AVERAGE.)

Average amount of financial assistance awarded to freshmen: \$29,934

Athletics: 8 NCAA Division III teams

Campus: Historic 225-acre campus includes a 1,200-seat amphitheater, seven residence halls and student apartments, student center, fitness center, and an athletic field and track complex.

92.2

OVER THE PAST FIVE YEARS, 92.2 PERCENT OF OUR GRADUATES ARE EMPLOYED OR PURSUING GRADUATE STUDY WITHIN A FEW SHORT MONTHS OF GRADUATION.

Visit. Whether you've already visited Meredith or it's your first time on campus, we're here to help. Register for a visit at meredith.edu/visit or contact the Office of Admissions at 1-800-Meredith or by email: admissions@meredith.edu

COME TO MEREDITH.

FIND OUT JUST HOW
STRONG
YOU ARE.

MEREDITH
COLLEGE

Office of Admissions | 3800 Hillsborough Street, Raleigh, NC 27607-5298
(919) 760-8581 or 1-800-MEREDITH | FAX (919) 760-2348 | admissions@meredith.edu

meredith.edu

Meredith College admits qualified women students without regard to race, creed, national or ethnic origin, sexual orientation, age, or disability.