



ENDICOTT
COLLEGE

☐ Returning Student; Student ID # _____

☐ New Student; Last 4 Digits of Social Security # _____

Graduate & Professional Studies Student Financial Aid Application 2021-22

Personal Information: (Please print clearly.)

Last Name _____ First Name _____

Permanent Home Address _____

City/State/Zip _____ Date of Birth ____ / ____ / ____

Email Address _____ Phone # (____) _____

Degree you are working toward?

☐ Certificate ☐ Undergraduate ☐ Master's ☐ Doctorate Major _____

Location of Classes: _____

☐ Beverly Campus ☐ Boston Campus ☐ Online

☐ Offsite Location (please specify) _____

Anticipated Enrollment:

☐ Full-time ☐ Part-time

Special Circumstances: (Please review the statements below and check all that apply.)

☐ Endicott Alumni ☐ Eligible to receive veterans/military educational benefits

I consent that the Office of Graduate & Professional Studies Financial Aid may use the contact information above as needed for financial aid purposes.

I understand that federal aid funds are based on semester enrollments. I agree that, unless I request a refund, Endicott College will hold my account credit balance resulting from the receipt of federal aid funds.

Student Signature (PLEASE NOTE: WE CANNOT ACCEPT ELECTRONIC SIGNATURES)

Date

Please return this form via mail, email, or fax to the appropriate location below.

Beverly/Online

Email: Graduate Students: gradfinaid@endicott.edu | Professional Studies: vlsfinaid@endicott.edu

Fax: 978-232-3000

Mail: Office of Graduate & Professional Studies Financial Aid | 376 Hale Street | Beverly, MA 01915

Boston

Email: bosfinaid@endicott.edu | Fax: 857-277-1329

Mail: Endicott College Boston | 200 Tremont Street | Boston, MA 02116

Professional Studies ONLY: The priority deadline date for MASSGrant is May 1.