



Estimated 2024 Income Form

Student Name: _____

Student ID #: _____

Total Estimated Income of Student's Household for 2024:

Alimony Received	\$
Business Income Severance Package	\$
	\$
	\$
Parent(s) Unemployment (include additional \$600 if received)	\$
Parent(s) Social Security Benefits	\$
Parent(s) Worker's Compensation	\$
Parent(s) Pension or Retirement Distributions	\$
Rental Property Income	\$
Veteran Benefits	\$
Other Income	\$
Total Estimated 2024 Income	\$

Additional Comments:

Email: finaid@endicott.edu

Fax: 978-232-2085

Mail: Endicott College

Attn: Financial Aid Office

376 Hale Street

Beverly, MA 01915