CLAFLIN UNIVERSITY OFFICE OF STUDENT FINANCIAL AID STUDENT FILE CHECKLIST 2019-2020

Please check (\checkmark) each document, as it is needed to award the student.

Student's Name				File Audit Completed
Student's Name:	Last Name,	First Name	M.I.	Date Initials
Social Security N	umber:			
Student's ID#:				
Student 5 ID#.				
Item is on file	7			

Yes	No	N/A	Description of Item			
			2019-2020 Verification Worksheet			
			2017 Student/ Spouse Federal Tax Transcript/2017 Untaxed Income Documentation			
			2017 Parent(s) Federal Tax Transcript/Untaxed Income Documentation			
			Claflin University Master Application Form			
			Claflin University FAFSA Signature Page Form			
			FERPA Consent Form			
			Rights & Responsibilities			
			Entrance Counseling (Entering First Time Student)			
			Master Promissory Note			
			Exit Counseling (Housed In Separate Location)			
			Selected For Verification			
			Date of Verification:			
			/ /			
			Pell Origination			
			Fall Date: Spring Date:			
			Loan Certified Date:			
			1 1			
			Other Correspondence deemed necessary			
			FA Counselor:			