



LINCOLN UNIVERSITY

COLLEGE OF GRADUATE AND UNDERGRADUATE STUDIES

First Name: _____ Last Name: _____

Student ID: _____ Grade Level: _____

Term: _____ Ind/Dep: _____

- | | |
|--|---|
| <input type="checkbox"/> Enrollment Agreement | <input type="checkbox"/> DEPENDENT: |
| <input type="checkbox"/> Proof of HS Completion | <input type="checkbox"/> PLUS MPN |
| <input type="checkbox"/> Entrance Counseling | <input type="checkbox"/> PLUS Loan Counseling |
| <input type="checkbox"/> Master Promissory Note (MPN) | |
| <input type="checkbox"/> ISIR | <input type="checkbox"/> School Related Forms: |
| <input type="checkbox"/> Transaction # _____ | <input type="checkbox"/> Drug free school |
| <input type="checkbox"/> Forms to clear C-Codes | <input type="checkbox"/> Code of Conduct |
| <input type="checkbox"/> Verification Forms (if selected) | <input type="checkbox"/> FERPA |
| <input type="checkbox"/> Taxes | <input type="checkbox"/> Program Specific Forms |
| <input type="checkbox"/> Award Letter | <input type="checkbox"/> SAP Warning |
| <input type="checkbox"/> Professional Judgement (PJ) Forms | <input type="checkbox"/> SAP Academic PLAN |

File Complete Date: _____

Exit Counseling Date: _____