



Rights and Responsibilities Checklist

I understand that I have a right to the following (check off each box as you read)

- Written information on my loan obligations and information on my rights
- A grace period and an explanation of what it means
- A disclosure statement, received before I begin to repay my loan, which includes information about interest rates, fees, the balance I owe, and the number of payments
- Deferment of repayment for certain defined periods, if I qualify and if I request it
- Prepayment of my loan in whole or in part anytime without an early repayment penalty
- A copy of my promissory note either before or at the time my loan is made
- Proof of discharge (cancellation) when my loan obligation is fulfilled

I understand I am responsible for

- Attending entrance counseling before my loan can be credited to my student account
- Attending exiting counseling before I leave school or drop below half-time enrollment
- Repaying my loan even if I don't complete my academic program(under certain circumstances) I am dissatisfied with the education I received, or I am unable to find employment after graduation
- Notify my school and my lender if I
 - Move/change my address
 - Change my name
 - Withdraw from school or drop below half- time (six credit hours) enrollment
 - Transfer to another school
 - Fail to enroll or reenroll in school for the period for which the loan was intended
 - Change my expected date of graduation
 - Graduate
- Making monthly payments on my loan(s) after I leave school, unless I have a deferment or forbearance
- I am declining loans

I have received entrance /exit counseling materials for Subsidized and Unsubsidized loan borrowers. I have read and I understand my rights and responsibilities as a loan borrower. I also understand that as a condition of this loan, I must attend classes and make satisfactory academic progress as defined by any school. This form will be used throughout my matriculation at Claflin University.

I understand that I am receiving a federal student loan that must be repaid

XXX-XX-

Student Name (Please Print)

Social Security Number

ID #

Student Signature

Date