CHECK LIST
Loans

Employee Name : ....

Type of Loan : ....

01. Loan Application is filled ☐

02. Eligibility for loan ☐

03. Loan number is given ☐

04. Supporting Documents

     a. Cost Estimates ☐

     b. Quotations ☐

     c. Medical Bills ☐

     d. Advance payment slips ☐

     e. Other ☐

05. Provident Fund Statement ☐

06. Guarantors and their UPF Statements ☐

07. Agreement is signed by the Registrar ☐

08. Calculations are checked ☐

09. Calculations are certified by SAB ☐

10. Stamp duty is calculated ☐

11. Approval of the registrar for payment ☐

12. Recommendation of the AR/SAR ☐

13. Certification of SAB/CDCE ☐

14. Cheque is prepared ☐

15. Bank Account details ☐

16. Two signatures are placed on the cheque ☐

17. Cheque is deposited ☐

Notes:

Prepared By:

Name : ………………………………….

………………………………..

Signature

Date :

Senior Assistant Bursar/CDCE

Please put "√" if Yes and use "X" for No/NA