Counseling Documentation Checklist

Agency Name: _________________________________

NAME______________________  Client #______  Date_______

_____ Questionnaire
_____ Credit Report
_____ Pay stubs
_____ Other income resources (SS, SSI, Pension, Child support, etc.)
_____ Homebuyer Certificate
_____ Client Action Plan
_____ Household Budget Worksheet
_____ Housing Affordability Worksheet
_____ Disclosures
_____ Narrative/Notes (left side of folder)
_____ Misc. Documents________________
_____ Misc. Documents________________

Sample