



LOAN APPLICATION

Referred by: _____

For what purpose will this loan be used? Car Loan Car Repair

Applicant's Name _____ Social Security # _____

Address _____ Email: _____

City _____ State _____ Zip _____ County _____

Date of Birth _____ Age _____ Ethnicity: _____

Gender: Male Female Marital Status: _____

Home Telephone# _____ Cell Phone # _____ Pager # _____

Time at this address: ____ Years ____ Months

Own Home: Yes No Mortgage/Rent Amount \$ _____

Previous Address * _____ City _____ State _____ Zip _____

County _____ Time at this address: ____ Years ____ Months

Name of nearest relative or friend not living with you: (Please provide three)

1. _____
Name Relationship Phone Number

Address Cellular Phone Pager Number

2. _____
Name Relationship Phone Number

Address Cellular Phone Pager Number

3. _____
Name Relationship Phone Number

Address Cellular Phone Pager Number

Present Employer

Employer Name _____ Occupation _____

Employer's Address _____ Supervisor _____

Business Phone _____ Supervisors Phone _____ Extension _____

Average hours per week _____ Pay Frequency _____ Date Hired _____

Wage per hour \$ _____

Other Income

Food Stamps Monthly Amount \$ _____

AFDC Monthly Amount \$ _____

Housing Assistance Monthly Amount \$ _____

Other Assistance Monthly Amount \$ _____

Child Support Monthly Amount \$ _____ Court Ordered? Yes No

Name of payer _____ Address of payer _____

City _____ State _____ Zip _____

Income from alimony or maintenance payments \$ _____

Previous Employers

1. Name _____ Occupation _____

Address _____ Date Hired _____ to _____

Phone # _____

2. Name _____ Occupation _____

Address _____ Date Hired _____ to _____

Phone # _____

Do you pay any alimony, child support or maintenance? Yes** No

Are there any claims, suits or judgements against you? Yes** No

Are you a co-signer or guarantor for anyone? Yes ** No

Have you declared bankruptcy? Yes ** No Was it discharged? Yes ** No

** If you answered yes to any of the above section, please explain.

All Others Living In Your Household (including children, spouse, relatives, friends, etc.)

Name	Relationship	Age	School
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List all education or training programs you are attending

School Name _____ Counselor _____

Phone # _____ Date of Registration _____

Anticipated Graduation Date _____ Number Credits Completed _____

Credits Needed to Graduate _____

If the loan is for transportation: How do you currently get to school or work? _____

How far is it to work or school? _____ Is the bus available? Yes No

Do you transport children to daycare? _____ How far is it to daycare? _____

Do you currently own a vehicle? _____ If yes, date purchased and purchase price _____

Your current vehicle: year, make, model, odometer, repairs needed and repair estimate: _____

CO-APPLICANT OR CO-SIGNER:

(Complete this section only if the co-signer will be contractually liable on the account, OR applicant is relying on co-applicant's income as a basis for repayment of account)

Applicant's Name (Please Print) _____ Date of Birth _____

Social Security Number _____ Home Phone # _____

Address _____ City _____ State _____ Zip _____

County _____ Time at this address: ___ Years ___ Months

Own Home: Yes No Mortgage/Rent Amount \$ _____

