

PERSONAL DETAILS

NAME IN FULL		ACCOUNT NO	
HOME ADDRESS		NO. OF YEARS AT CURRENT ADDRESS	
PREVIOUS ADDRESS: <i>(required if current address is less than 1 year)</i>			
TEL NO.	CELL NO.	DATE OF BIRTH (mm/dd/yy)	NATIONAL REGISTRATION NUMBER:
MARTIAL STATUS: <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOW <input type="checkbox"/> WIDOWER		NAME OF SPOUSE	
EMAIL ADDRESS		NO. OF DEPENDENTS	AGES OF DEPENDENTS

CURRENT EMPLOYER	ADDRESS	
OCCUPATION	DEPARTMENT	TELEPHONE NO.
EMPLOYMENT STATUS <input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CASUAL	LAST WORKING DAY	YEARS EMPLOYED

PREVIOUS EMPLOYER *(required if current employment is less than 1 year)*

NAMES AND ADDRESSES OF TWO (2) REFERENCES

NAME OF NEXT OF KIN _____	NAME OF REFERENCE - NOT LIVING WITH YOU _____
ADDRESS OF NEXT OF KIN _____	ADDRESS _____
RELATIONSHIP _____ TELEPHONE NO. _____	RELATIONSHIP _____ TELEPHONE NO. _____

LOAN AMOUNT REQUESTED: *(Words & Figures)*

DETAILS OF INCOME AND EXPENDITURE TO SUPPORT LOAN APPLICATION

INCOME: <input type="checkbox"/> WEEKLY <input type="checkbox"/> SEMI-MONTHLY <input type="checkbox"/> MONTHLY	\$
ALLOWANCES:	\$
OTHER INCOME: (Give details)	\$
TOTAL INCOME	\$

MONTHLY EXPENSES		DO NOT WRITE IN THIS SPACE.
P.A.Y.E./INCOME TAX & NIS	\$	
LIFE AND/OR MEDICAL INSURANCE	\$	
RENT AND/OR MORTGAGE	\$	
FOOD	\$	
UTILITIES (e.g. Telephone, Electricity, Water, Paid Television)	\$	
VEHICLE EXPENSE OR BUS FARE	\$	
BANK PAYMENT	\$	
CREDIT CARD(S) PAYMENT	\$	
HIRE PURCHASE	\$	
TOTAL EXPENSES	\$	
SURPLUS	\$	

The Credit Union may verify any information provided to it by me/us from whatever sources it deems necessary. The Credit Union is hereby authorized to obtain any information it requires relative to my/our credit history or application for credit and any such source is hereby authorized to provide any such requested information.

The Credit Union is further authorized to disclose to any Credit Bureau, reporting agency, business, financial institution or person with whom I have entered into or propose to enter into a business or financial relationship with, personal information or such information regarding my/our credit or financial history, or information as is deemed appropriate, lawful and necessary in the sole discretion of the Credit Union or as expressly provided by law. I/we jointly and severally agree to indemnify the Credit Union and save the Credit Union from any and all claims in damages or otherwise arising from any disclosure as herein authorized.

Signature: _____

Date: _____

