Loan Application Worksheet Member Account Number Loan Description Amount Requested **Payment Amount** Insurance Protection Monthly **Payment Frequency** Loan Term in Months Method of Payment Cash Interest Rate PERSON PERSON Co-Applicant **Applicant** NAME: LAST NAME: LAST MIDDLE MARITAL STATUS FIRST MIDDLE MARITAL STATUS FIRST MOTHER'S MAIDEN NAME MOTHER'S MAIDEN NAME OTHER CREDIT NAME OTHER CREDIT NAME DRIVER'S LICENSE NUMBER STATE BIRTHDATE DRIVER'S LICENSE NUMBER STATE BIRTHDATE HOME PHONE BUSINESS PHONE BUSINESS EXT. HOME PHONE BUSINESS PHONE BUSINESS EXT. E-MAIL ADDRESS E-MAIL ADDRESS ALTERNATE E-MAIL ADDRESS ALTERNATE E-MAIL ADDRESS PRESENT ADDRESS: STREET PRESENT ADDRESS: STREET CITY CITY MONTHS AT ADDRESS OWN/RENT/ETC. MONTHS AT ADDRESS STATE ZIP CODE OWN/RENT/ETC. STATE ZIP CODE PREVIOUS ADDRESS: PREVIOUS ADDRESS: STREET OWN/RENT/ETC. MONTHS AT ADDRESS MONTHS AT ADDRESS OWN/RENT/ETC. COUNT AGES OF DEPENDENTS COUNT AGES OF DEPENDENTS STATUS EMPLOYER: NAME STATUS Employed EMPLOYER: NAME EMPLOYER: ADDRESS EMPLOYER: ADDRESS OCCUPATION SUPERVISOR'S NAME OCCUPATION SUPERVISOR'S NAME HOURS / WEEK MONTHLY INCOME LENGTH OF EMPLOYMENT START DATE HOURS / WEEK MONTHLY INCOME LENGTH OF EMPLOYMENT START DATE Yr Mo Mo Yr PREVIOUS EMPLOYER: NAME PREVIOUS EMPLOYER: NAME PREVIOUS EMPLOYER: ADDRESS PREVIOUS EMPLOYER: ADDRESS OCCUPATION OCCUPATION SUPERVISOR'S NAME SUPERVISOR'S NAME LENGTH OF EMPLOYMENT START DATE END DATE MONTHLY INCOME LENGTH OF EMPLOYMENT START DATE MONTHLY INCOME END DATE Mo PERSONAL REFERENCE: NAME PERSONAL REFERENCE: NAME ADDRESS ADDRESS RELATIONSHIP RELATIONSHIP PHONE NUMBER RELATIVE PHONE NUMBER RELATIVE PERSONAL REFERENCE: NAME PERSONAL REFERENCE: NAME ADDRESS ADDRESS PHONE NUMBER PHONE NUMBER RELATIONSHIP RELATIVE RELATIONSHIP RELATIVE

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OTHER INFORMATION	Α	С
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Judgement?	No	
Bankruptcy?	No	
Past Repossession?	No	
Party in a Lawsuit?	No	
Income likely to decline?	No	prime a succession
Past Foreclosure?	No	
Co-Signer on another loan?	No	
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