

Republic of the Philippines
DepEd PROVIDENT FUND
 Region III
 Division of City Schools
 City of Malolos

New _____ Renewal _____

() Calamity () Regular () Special

Loan Application No: _____

____ Educational ____ Hospitalization/Medical
 ____ House Arrears ____ Major House Repair
 ____ Payment of Loan from Private Institution
 ____ Others (Pls. Specify) _____

BORROWER'S INFORMATION:			CO-MAKER'S INFORMATION:		
(Last Name)	(First Name)	(M.I.)	(Last Name)	(First Name)	(M.I.)
Home Address:			Home Address:		
Date of Birth:		Civil Status:	Date of Birth:		Civil Status:
Position:			Position:		
Division/Office:			Division/Office:		
Monthly Salary:		Status:	Monthly Salary:		Status:
No. of Yrs. In Service:		No. of Leave Credits:	No. of Yrs. In Service		
SPECIMEN SIGNATURES: (2 below)			SPECIMEN SIGNATURES: (2 below)		

APPLICATION AGREEMENT

<p>I hereby apply for a Provident Fund loan in the amount _____ and at the amortization schedule stated below. In consideration of the grant thereof, I promise to pay all the installments due and bind myself to the terms and conditions of the loan. Accordingly, I hereby authorize the deductions of the monthly amortization from my salary when due. Should I be separated from the service I also hereby agree to settle my outstanding loan balance from the date of my retirement/separation from the service, either through full payment in cash or issuance of duly notarized promissory note.</p>	<p>Should the principal borrower be separated from the service and there are no retirement nor separation benefits due him/her, I hereby agree to assume all his/her outstanding obligations for the grant of his loan upon proper notification by the Provident Fund Secretariat. Accordingly, I hereby authorize the deduction from my monthly salary the amortizations for the outstanding obligation of the principal borrower until his/her loan has been fully paid.</p>
<p>_____ Signature of Borrower Over Printed Name Employee No. _____</p>	<p>_____ Date</p>
<p>_____ Co-Maker's Signature Over Printed Name Employee No. _____</p>	<p>_____ Date</p>

AMORTIZATION SCHEDULE

Amount of Loan:	(12 months)	(24 months)	(36 months)	(48 months)	(60 months)
() 20,000.00	1,721.33	886.42	608.44	469.71	386.66
() 30,000.00	2,582.00	1,329.62	912.66	704.56	579.99
() 50,000.00	4,303.33	2,216.04	1,521.10	1,174.26	966.65
() 100,000.00	8,606.65	4,432.07	3,042.20	2,348.51	1,933.29

Pls. Encircle preferred amortization schedule (Subject to computation of monthly net take home pay)

AUTHORIZATION FOR SALARY DEDUCTION

The Cashier
DepEd – Division of Malolos
Malolos, Bulacan

I hereby authorize the deduction from my salary the amount of _____ PESOS (P _____) for _____ months starting in _____, 20 ____ or until my total amount of _____ PESOS (P _____) has been paid. Amount deducted shall be credited to the amount of DepEd Provident Fund amortization on said loans.

 (Signature of Borrower Over Printed Name)

Employee Number : _____
 Designation : _____
 Status : _____

CERTIFICATE OF EMPLOYMENT AND CREDIBILITY

Office: _____ Date: _____

This Office certifies that (1) the above applicant is a / / permanent / / casual employee of this Office and is not on leave of absence without pay; (2) there is no pending administrative charge against him; (3) the net pay of the borrower indicated is sufficient to cover monthly installments of this loan; and (4) the information reported by said applicant is true and correct:

Signature of Employees : _____
No. of Years In Service : _____
No. of Leave Credits : _____

INDORSING OFFICIALS

PERSONNEL DIVISION:

IMMEDIATE SUPERVISOR

RIA LORRAINE P. MENDOZA
Administrative Officer IV

District Supervisor/Principal

FOR SECRETARIAT USE ONLY:

Documents Submitted

- () Payslip
- () Photocopy of payroll/payslip
- () Statement of House Arrears
- () Others: _____
- () Statement of Official Receipt of Tuition Fee
- () Bill of Materials for House Repair
- () Official Receipt/Doctor's Prescription
- () Approved Appointment

Computation of Loan:

Amount of Loan Applied For _____ Amt. Of Monthly Amortization _____
 Balance on Previous Loans _____ Amortization Schedule _____
 Net Proceeds _____

HERALD MARSON B. TOLENTINO
Accountant III

ACTION TAKEN:

() **Approved**

() **Disapproved**

RISA BEA SOCORRO M. BORRES
Administrative Officer V- Admin Services
Head Secretariat

MERLINA P. CRUZ, Ph. D.
Officer-In- Charge
Office of the Schools Division Superintendent
Chairman

*Approval/Disapproval of special loan by Board Chairman upon the recommendation of the Secretariat.