BOWN NG FOUR		Republic of	the Philippines		
.KAG.		Departme	nt of Education		
TO BOAR NO PORT		Provid	dent Fund		
Date Submitted:			Loan Application No.:		
Loan Amount:	PhP		Purpose:		
	Term:	year/s			
Type of Loan:		7	☐ Hospitalization		
□ Multi-purpose □ New	!		□ Long Medication□ House Arrears	on/Rehabilitation /Fauity	
□ Renewal			☐ House Repair-		
□ Additional			☐ House Repair-		
			□ Payment of Lo□ Calamity	ans from Private Institu	tion
				y):	
P	Borrower's Information		1	Co-Maker's Information	
	offower's information			CO-IVIAREI S IIIIOIIIIALIOII	
(Surname)	(First Name)	(Middle Name)	(Surnamo)	(First Name)	(Middle Name
	(First Name)			(Filst Name)	· ·
Position:			Position:		
Off:	Employment Sta	itus:	Employee No.: Office:		nt Status:
Date of Birth:	Age: _		Date of Birth:	A	ge:
Monthly Salary: PhP	Office tel.	. no:	Monthly Salary: PhP	Office	tel. no:
Years in Service: DepEd E-mail address:	Mobile No.:		Years in Service: DepEd E-mail address:	Mobile No.	:
•	Specimen Signatures:		Depen E man address.	Specimen Signatures:	
		LOAN	AGREEMENT		
I hereby apply for a Pr	rovident Fund Loan in th	e amount of PESOS: (P). In	, ,	all the outstanding obligation and the separated from the	•
	thereof, I promise to pay all		retirement or separation	benefits due to him/her is no	ot received or is insufficient
	tion schedule and bind myse tipulated in the applicable g			outstanding loan, and upon p	roper notification by the
	ument also serves as the F				
approval of this loan.			= :	horize the monthly deduction	
Accordingly, I hereby auth	orize the deductions of the	monthly amortization		standing obligation of the pr	incipal borrower until
from my salary. Should I be	e separated from the service,	, I also hereby agree to			
	an balance before the date, either through full payment				
execution of a notarized Pro		e in cash or timough the			
Signature of Bo	orrower	Date	Signature of Co	o-Maker	Date
over Printed Name			over Printed		
	CEF	RTIFICATE OF EMPL	OYMENT AND CREDIBI	LITY	
Personnel Division/Unit	:		Legal Service/Unit:		
This is to certify that the above loan applicant/borrower: (1.) is a permanent/ co-terminus employee of this Office			This is to certify that th	e above loan applicant/l	porrower has no pending
			administrative charge against him/her based on records on file with DepEd-		
	for the payre	oll month & year of	Malolos.		
; and	and correct infromation o	on the Loan			
Application Form.	and correct initioniation o	are Loan			
M	AGDALENA A. LUCILLO		ATTY.	ANNA DOMINIQUE L. G	UISON
	Signature over Printed Name			Signature over Printed Name	
	on: Administrative Officer IV	-HRMO		tion: Attorney III	
Da				-u.c.	

SECRETARIAT'S ASSESSMENT/EVALUATION						
A. Documents Submitted: (Three copies of each) Loan Application Form (LAF) Letter request addressed to SDS Latest copy of pay slip Photocopy of DepEd ID Approved Appointment (for FIRST TIME borrowers and Coterminus employees only) Document showing proof that the co-terminus employee has rendered at least 2 years service in DepEd, e.g. Notarized Contract of Service Others (specify):	 □ Additional documents for Additional Loan: □ Letter request □ Hospitalization/Medical Expenses □ Medical Abstract/Certificate/Prescription/Diagnosis 					
B. Completeness and Veracity of Submitted Documents: □ Signed and completely filled out LAF □ Complete supporting documents for type of loan applied □ Signatures on LAF are by authorized signatories	Reviewed by: MAGDALENA A. LUCILLO Administrative Officer IV-HRMO					
C. Eligibility of the Borrower and Co-Maker Borrower will not reach the mandatory age retirement on Co-Maker will not reach the mandatory age retirement on Borrower has Outstanding PF Loan Balance: Current Loan Balance Past-Due Loans Amount: Php Amount: Php No. of Years/Months Past-Due Borrower's Net Take-Home Pay after deduction of monthly or higher than the required threshold for the current year. For renewal of loans: Borrower has paid at least 30% of the Percentage of principal paid:	Month/s: y amortization of the loan being applied for is equal to					
	Verified by: MA. CRISTINA C. PANGANIBAN Administrative Officer II					
D. Computation of Loan: Principal Amount of Loan PhP Less: Outstanding Balance of Loan to be Renewed Principal PhP Interest Net Proceeds: PhP	Net Take Home Pay after Deduction PhP Monthly Amortization PhP Period of Loan (mm/yy-mm/yy) Date Processed:					
Reviewed by: HERALD MARSON B. TOLENTINO Accountant III	Remarks:					
ACTI	ON TAKEN:					
Recommending Approval:	☐ Approved☐ Disapproved☐					
WILLIAM C. DIONISIO Administrative Officer V Date:	LEILANI SAMSON CUNANAN, CESO V Schools Division Superintendent Date:					



	Authorization for Salary Deduction		
Personnel Division			
DepEd, Meralco Ave.,	, Pasig City		
I hereby auth	norize the deduction of	PESOS	(F
	my salary for months, starting in, 20 or until my total outstanding loan of PESOS (P) has been fully paid (A)		to
	, 20 or until my total outstanding loan of PESOS (P) has been fully paid. A		
the account of the Dep	, 20 or until my total outstanding loan of PESOS (P) has been fully paid. A FED Provident Fund as receivables on the said loans.		ited to

AMORTIZATION SCHEDULE

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

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
() 200,000.00	17,213.29	8,864.13	6,084.39	4,697.01	3,866.57
ladditional loan	on/u)				

(additional loan only)