

ARCHDIOCESE OF NAIROBI
SOCIAL PROMOTION REGISTERED TRUSTEES

LOAN APPLICATION FORM

Serial No:

FOR OFFICIAL USE ONLY						
NAME OF SELF-HELP GROUP:						
Received By: Name:		Signature		Date:		
Membership Number (As per the system):		Loan Number (As per the previous credit history):				
APPLICANT INFORMATION						
Name of Applicant:						
National ID/Passport No:		M/No:				
Marital Status:	Married <input type="checkbox"/>	Single <input type="checkbox"/>	Widow <input type="checkbox"/>	Others:		
Date of Birth:		Phone No:				
Current Address:						
Area of Residence:		Town:		Estate/village:		
Residence:	Owned <input type="checkbox"/>	Rented <input type="checkbox"/>	Monthly payment or rent:			
EMPLOYMENT INFORMATION (WHERE APPLICABLE)						
Current Employer:				Employer Address:		
Phone:		Position:		Period in Current Employment:		
City/Town:		County:		Monthly Income:		
E-mail:						
OTHER SOURCES OF INCOME						
Description:	1.				Monthly Income:	1.
	2.					2.
	3.					3.
LOAN APPLICATION						
Amount Requested in Figures, Kshs:		Amount in words:				
Repayable in	monthly instalments					
Purpose of the Loan:	1.					
	2.					
	3.					
OTHER LOANS / DEBTS / OBLIGATIONS						
Description:					Amount:	
	1.				1.	
	2.				2.	
Applicant Signature:					Date:	

TERMS AND CONDITIONS

The Applicant must read the following terms and conditions before filling and signing this form;

1. The Loan Application must be made on this official loan form, fully completed and appropriately signed by both the loanee and guarantors in their own handwriting.
2. The applicant must be willing to cooperate in the pre-loan application interview by the appraising officer.
3. Loans are granted in accordance with the self-help programme credit policy and lending conditions existing at the time of application.
4. The applicant must have paid their savings consecutively for a minimum period of six months prior to the date of application.
5. Any amount of money paid by a member to boost savings shall wait for four months before it can be used to secure a loan.
6. The amount applied for shall be fully covered by the loanees and guarantors' savings.
7. The applicant must undertake to service the applied loan regularly without causing embarrassment and loss to the guarantors.
8. The self-help group shall contact the guarantors to verify their guarantorship consent.
9. A dormant member shall not be considered for any loan.
10. All loan applications for Kshs. 1,000,000.00 and above must be accompanied by the current 6 months bank statement and they will be subjected to the coordinating office for further approval after the executive committee approval.
11. An emergency loan that is restricted to Kshs. 100,000.00 and below will be granted with a maximum repayment period of 12 months supported by evidenced documentation.
12. School fees loan will be granted on production of a valid school fees structure and is repayable within 12 months from the date of disbursement for primary and secondary schools and 24 months for higher education institutions.
13. If a member decides to cancel his/her loan after the process has been finalized a fee of Kshs _____/= shall be charged
14. Any alteration on the loan form may cause disqualification.
15. The applicant shall by completing this application authorize Caritas Nairobi through the applicant's self-help group to receive, share, provide and exchange applicant's credit information with Credit Reference Bureau(s).

APPLICANT COMMITMENT

I declare that I have **READ, UNDERSTOOD AND SHALL COMPLY** with all the **TERMS AND CONDITIONS** as contained in this loan application form, and the particulars I have given are true to the best of my knowledge and belief.

Applicant Name:

Signature:

Date:

Witnessed by:

Name:

Member number:

Signature:

Date:

(TO BE COMPLETED BY THE GUARANTORS)

Guarantors to fill their details in the table below and should sign after the Applicant has indicated the amount applied and guaranteed both in figures and in words. **(Borrower's savings must cover a third of the guarantorship)**

Amount of loan guaranteed Kshs :

Amount in Words :

(Note: Amount guaranteed must be equal to or more than the amount applied for)

In consideration of granting the above loan or less amount that may be approved, we the undersigned accept jointly and severally liability for its repayment in the event of the borrower's default.

We understand that if the amount of loan granted above is defaulted, it will be recovered by an offset against our savings in the self-help group and that we shall not be eligible for a loan unless the amount in default has been fully cleared.

The loanee is well known to us and we undertake to guarantee this loan until it's fully paid.

M No.	Name in Full	Cell Phone No.	Id No.	Self-help Group Name	Amount Offered	Signature

PERSONAL COMMITMENTS

I further pledge my future savings as additional security for the loan so approved in addition to my current savings. I hereby declare that the foregoing particulars are true to the best of my knowledge and belief and I agree to abide by the self-help programme guidelines, self-help group by-laws, terms and conditions of the self-help programme credit policy and variations by the approving committee. I also consent to be referenced upon this application in a Credit Reference Bureau (CRB) and be listed in the same in case of default.

Signature:

Date:

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GUARANTORS VETTING

MNo. (as per the system)	Name in Full(as per the system)	Total current savings	Existing loan balance	Available savings (Free shares)	Amount Offered	Appraiser remarks

The guarantors have been vetted and confirmed that their details including names, membership, ID numbers and signatures are conforming to the details held in our records/files and that they qualify to be guarantors as per the above table.

Comments by the vetting officer
(Credit officer):

Names (in full):

Signature:

Date:

LOAN APPRAISAL (BY CREDIT OFFICER)

Loan ability has been computed in consideration of savings ability, income ability, and the amount guaranteed

Amount of loan recommended for approval:

Amount
in Figures, Kshs :

Amount
in Words :

payable in

Monthly equal instalment of Kshs

per month.

Comments by the appraising officer (on this form and in the system):

Names (in full):

Signature

Date:

Loan Appraisal Confirmed by (Specify the designation):

Names (in full):

Signature

Date:

LOAN EXAMINATION AND APPROVAL BY EXECUTIVE COMMITTEE

We the executive committee have independently examined and satisfied ourselves that this loan has been granted in accordance with the self-help programme guidelines, self-help group bylaws and existing credit policy currently in force.

We have also confirmed that the proper loan processing has been followed in accordance with the self-help programme guidelines, self-help group bylaws and existing credit policy and hereby approve the applied loan for disbursement.

Chairperson Name
(in Full):

Signature

Date:

Treasurer Name
(in Full):

Signature

Date:

Secretary Name
(in Full):

Signature

Date:

COORDINATING OFFICE FINAL APPROVAL (WHERE APPLICABLE)

Approving Officer's Name:

Designation:

Signature:

Date:

LOAN DISBURSEMENT

Payment Voucher No:

Cheque No.:

Cheque Date:

Recipient Full Name
(Must be the applicant):

Amount Received: Kshs:

Amount
in Words :

Recipient Signature:

Date: