



XAVIER UNIVERSITY COMMUNITY CREDIT COOPERATIVE

Xavier University, Cagayan de Oro City

APPLICATION FOR HEALTH CARE AND PENSION PLAN LOAN

Date _____

In connection with my application for loan with XUCCCO, I certify that I have no plans whatsoever of applying for a leave or retirement or resignation within the period that I will be paying my obligations to this loan.

I solemnly swear that I have no plans of applying for any additional loans from any other loaning agency or agencies, which will jeopardize my ability to pay this loan.

Signed in the presence of _____ Signature of borrower/Member _____

Name: (Please Print) _____

Complete City Address: _____

Home Address: _____

College/Dep't/Office in XU: _____ Contact Number _____

TIN # _____ SSS# _____ Philhealth # _____ HDMF ID # _____

- (1) I hereby apply for a (check appropriate one)
- | | |
|--|---------------------------------|
| _____ Short-term loan (2 months only) | _____ Long Term loan (2 years) |
| _____ Long-term loan (3 to 12 months) | _____ Long Term loan (3 years) |
| _____ Long-term loan (13 to 18 months) | _____ Long Term loan, |
| | Others pls. specify _____ |

in the amount of _____ (P _____)

(2) The purpose of the loan is for: _____

(3) In payment of this loan plus interest charges, I shall authorize the office of (Check appropriate one)

- | | |
|--------------------------------------|-------------------------|
| _____ Finance of Xavier University | _____ Aggie Finance |
| _____ Finance of RIMCU | _____ Finance of XUCMPC |
| _____ OTHERS: (please specify) _____ | |

to deduct from my regular salary/wages, including 13th month, honoraria and other forms of compensation every payday in the total amount of _____ (P _____) to start on (date) _____ in favor of XUCCCO.

(4) In addition, I shall authorize the same office to deduct from my regular salary/wages, 13th month, honoraria and other forms of compensation every payday on the same date the amount of _____ (_____) for my deposit in favor of XUCCCO.

(5) As security for the payment of the loan, I am willing to assign to XUCCCO my share+ deposit of _____ (P _____) including whatever subsequent deposit I may make to the coop until the amount of the loan is fully paid.

Signature of borrower/Member

(FOR XUCCCO STAFF ONLY)

- | | |
|---|-----------------------------|
| 1. Applicant's previous deductions for deposit: P _____ | 5. Employment Status: _____ |
| 2. Applicant's total amount of share to date: P _____ | _____ FT/REGular |
| 3. Applicant's total amount of savings to date: P _____ | _____ Academic |
| 4. Record of applicant's previous loan: _____ | _____ Non.- academic |
| Outstanding balance: P _____ | |
| Total deductions per quincena: _____ | |
| Comments on record of payment: _____ | |

Signature over Printed Name of Office-In-Charge

ACTION OF THE CREDIT COMMITTEE OR LOAN OFFICER

Based on the merits and facts presented, the loan policies and other pertinent factors, this loan is hereby:

_____ Approved _____ Disapproved _____ Other Action

for the Amount of P _____ (Type of Loan: _____).

Signature Over Printed Name

Signature Over Printed Name

Signature Over Printed Name