

Family Loan Program Initial Application

Date _____ Name _____ DOB _____

Spouse's Name _____ DOB _____

Home Phone _____ Cell _____

Address _____ Town _____ Zip _____

(If less than 2 years, list previous address on reverse)

Own/Rent? _____ Monthly Rent? _____ How long? _____

Email _____

Amount Requested \$ _____ Purpose of Loan _____

How did you find out about the program? _____

(List additional children on reverse)

Child's Name _____ DOB _____

Child's Name _____ DOB _____

Child's Name _____ DOB _____

Child's Name _____ DOB _____

Employer(s) _____

(If less than 2 years, list previous job on reverse)

Employer's Address and Phone _____

Monthly Net Income \$ _____ Length of Employment _____

Spouse's Employer(s) _____

(If less than 2 years, list previous job on reverse)

Employer's Address and Phone _____

Monthly Net Income \$ _____ Length of Employment _____

Other Sources of Income?: SNAP; Child Support; Gov't Assistance, etc: _____

Car Loan(s): Vehicle _____ Amount _____ Monthly Payment _____

Credit Card _____ Interest Rate _____ Balance _____

Credit Card _____ Interest Rate _____ Balance _____

Credit Card _____ Interest Rate _____ Balance _____

Credit Card _____ Interest Rate _____ Balance _____

Any other outstanding debt. Please list debtor(s) and amount(s) owed: _____
