

**Alternative Loan Program, St Vincent de Paul Society, District Council of Arlington, VA**

Amount of Loan Request: \_\_\_\_\_ (\$25 minimum Monthly Repayment)  
 Please explain how receiving this loan will be helpful to you:

**SECTION A - APPLICANT**

NAME (Please print full name)		HOME PHONE	CELL PHONE	REQUESTED MONTHLY PAYMENT:
PRESENT STREET		HOW LONG AT THIS ADDRESS	PURPOSE OF LOAN	
CITY, STATE, AND ZIP		E-MAIL ADDRESS:		
IMMEDIATE PREVIOUS ADDRESS		HOW LONG AT THIS ADDRESS		
CITY AND STATE		ZIP	Have you ever applied for a loan with SVdP? <input type="checkbox"/> Yes <input type="checkbox"/> No	
ARE YOU A U. S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A RESIDENT ALIEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		Have you ever applied for a loan with AFCU? <input type="checkbox"/> Yes <input type="checkbox"/> No	
SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE		BIRTH DATE & AGE	
NO. OF DEPENDENTS – LIST BY AGE				

MY PRINCIPAL FINANCIAL INSTITUTION IS:  
 Services presently used:  Checking Account  Savings Account  Safe Deposit  Loan  Cert. of Deposit  
 No. No.

OTHER FINANCIAL INSTITUTIONS USED:

**SECTION B – INCOME AND EMPLOYMENT**

PRESENT EMPLOYER		BUSINESS PHONE		
EMPLOYER ADDRESS		ANNUAL GROSS SALARY or HOURLY RATE:	\$	
POSITION OR TITLE	DATE OF EMPLOY	MONTHLY NET INCOME:		\$
		OTHER INCOME/SOURCE:		
PREVIOUS EMPLOYER AND ADDRESS		\$		
		\$		
POSITION OR TITLE	YEARS EMPLOYED	\$		
		TOTAL MONTHLY INCOME		
\$				

**SECTION C – ASSETS**

AUTOS (Make, Model, Year)	VALUE	2 <sup>nd</sup> Vehicle	VALUE	Other Vehicle	VALUE	TOTAL VALUE
REAL ESTATE (Location)	DATE PURCHASED		PURCHASE COST			
OTHER ASSETS (describe) AND ESTIMATED VALUE			OTHER ASSETS (describe) AND ESTIMATED VALUE			
OTHER ASSETS (describe) AND ESTIMATED VALUE			TOTAL ASSETS:			

Please explain how you will be able to repay this loan and if you anticipate having any difficulties making repayments each month.

**SECTION D – LIABILITIES AND INDEBTEDNESS**

List below all indebtedness to banks, credit unions, stores, finance companies, individuals and other creditors, including obligations to pay alimony, child support, separate maintenance, rent, mortgages, etc.

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	ORIGINAL DEBT	PRESENT AMOUNT OWED	COLLATERAL	MONTHLY PAYMENT
LANDLORD OR MORTGAGE HOLDER	<input type="checkbox"/> Rent Payment <input type="checkbox"/> Mortgage	(omit rent)	(omit rent)		
Other					
Other					
CREDIT CARDS					
<b>Totals</b>		<b>LIABILITIES:</b>		<b>MONTHLY PAYMENTS:</b>	

Have you ever been bankrupt or had any judgments or garnishments against you?  NO  YES- WHEN?

Have you ever written bad checks or been accused of fraudulent activity?  NO  YES- Describe:

**SECTION E – SPOUSE INFORMATION**

NAME / RELATIONSHIP TO APPLICANT			<input type="checkbox"/> CO-APPLICANT	<input type="checkbox"/> GUARANTOR
			<input type="checkbox"/> ENDORSER	
ADDRESS		BUSINESS PHONE	CELL/HOME PHONE	
EMPLOYED BY		ADDRESS		
HOW LONG	POSITION OR TITLE	LAST 4 SSN	BIRTH DATE & AGE	
MONTHLY INCOME	OTHER INCOME	TOTAL INCOME	DRIVERS LICENSE NUMBER / STATE	
ARE YOU A U.S. CITIZEN: <input type="checkbox"/> Yes <input type="checkbox"/> No		ARE YOU A RESIDENT ALIEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		
SPOUSE PRINCIPAL FINANCIAL INSTITUTION IS:				
Services presently used: <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account <input type="checkbox"/> Safe Deposit <input type="checkbox"/> Loan <input type="checkbox"/> Cert. of Deposit				
No. <input type="checkbox"/> No.				
OTHER FINANCIAL INSTITUTIONS USED:				
SPOUSE PRINCIPAL FINANCIAL INSTITUTION IS:				
Services presently used: <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account <input type="checkbox"/> Safe Deposit <input type="checkbox"/> Loan <input type="checkbox"/> Cert. of Deposit				
No. <input type="checkbox"/> No.				
OTHER FINANCIAL INSTITUTIONS USED:				

**SIGNATURES**

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application whether or not loan is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me. I/we have applied for a loan from Apple Federal Credit which is secured by a pledge of assets by the St. Vincent de Paul Society (SVdP). I/we understand and agree that Apple Federal Credit Union, with the SVdP, may share information relating to my loan performance including, but not limited to, repayment by me.

APPLICANT'S SIGNATURE

DATE

X \_\_\_\_\_

\_\_\_\_\_

SPOUSE SIGNATURE (Where Applicable)

DATE

X \_\_\_\_\_

\_\_\_\_\_