

CONFIDENTIAL



SALARY ADVANCE LOAN APPLICATION FORM

(A) APPLICANT'S PERSONAL INFORMATION

NAME ID No

EMPLOYER STAFF NO Mno.....

TEL.....EMAIL.....

AMOUNT APPLIED FOR KShs. (In words)

Loan disbursed through cash

BANK DETAILS – where applicable

I wish to confirm that my loan amount should be credited to the following bank account:

Account Names _____

Bank _____

Account Number _____

Branch _____

Attach two current Pay slips

(B)CONDITIONS

1. The loan application form must supported by two recent pay slip (certified by the employer's payroll officer), copy of national identity card/ passport and any other relevant supporting documents.
2. This loan shall be charged an interest of 3 % in line with AMREF Sacco credit policy.
3. The amount advanced shall be recovered in full from the salary within the same month granted.

I, hereby declare that the foregoing particulars are true to the best of my knowledge and belief and agree to abide by the bylaws of the Society, the loan policy and any variations by the Board

I, hereby authorize the amount granted, to be recovered in full from my Salary within the same month

Signature Date

WITNESSED BY: NAMEMEMBER No.....

SIGNATURE DATE

C EMPLOYER'S SALARIES SECTION

Taking all other deductions into account, the applicant qualifies for a loan not exceeding KShs _____

I hereby certify that the attached copies of pay slips are true copies of the original

Name.....Designation.....Signature.....Date.....

(G) LOAN APPRAISAL: FOR OFFICIAL USE ONLY

1. ELIGIBILITY CALCULATIONS

(a) Amount available to service the loan KShs

(b) Loan recommended KShs

(c) Prepared byDesignationSignature Date.....

2. LOANS OFFICER

Amount approved

Signature Date