



Republic of the Philippines
Department of Education
PROVIDENT FUND

Date Submitted: _____
 Loan Amount: _____
 Type of Loan: Term: _____ year/s
 ○ Multi-purpose
 ○ New
 ○ Renewal
 ○ Additional

Loan Application No. _____

Purpose:

- Educational
- Hospitalization/Medical
- Long Medication/Rehabilitation
- House Arrears/Equity
- House Repair-Major
- House Repair-Minor
- Payment of loans from private institutions
- Calamity
- Others (specify): _____

Borrower's Information			Co-Maker's Information		
(Surname)	(First Name)	(M.I.)	(Surname)	(First Name)	(M.I.)
Home Address: _____			Home Address: _____		
Position: _____			Position: <u>Administrative Assistant III</u>		
Employee No.: _____ Employment Status: _____			Employee No.: _____ Employment Status: _____		
Office: _____			Office: _____		
Date of Birth: _____ Age: _____			Date of Birth: _____ Age: _____		
Monthly Salary: _____			Monthly Salary: _____		
Years in Service: _____ Mobile No. _____			Years in Service: _____ Mobile No. _____		
DepEd E-mail Address: _____			DepEd E-mail Address: _____		
Specimen Signatures: _____			Specimen Signatures: _____		

LOAN AGREEMENT

I hereby apply for a Provident Fund Loan in the amount of
PESOS:_____

(P _____). In consideration of the grant thereof, I promise to pay all installment due based on the attached amortization schedule and bind myself with the terms and conditions of the loan as stipulated in the applicable guidelines of the DepEd Provident Fund. This document also serves as the Promissory Note upon approval of this loan.

Accordingly, I hereby authorize the deductions of the monthly amortization from my salary. Should I be separated from the service, I also hereby agree to settle my outstanding loan balance before the date of my retirement/separation from the service, either through full payment in cash or through the execution of a notarized Promissory Note.

Signature of Borrower	Date
Over Printed Name	

I hereby agree to assume all the outstanding obligations for the grant of this loan should the principal borrower be separated from the service, and either retirement or separation benefits due to him/her is not received or is insufficient to settle the borrower's outstanding loan, and upon proper notification by the Provident Fund Secretariat.

Accordingly, I hereby authorize the monthly deduction from my salary of the amortizations for the outstanding obligations of the principal borrower until his/her loan is fully paid.

Signature of Co-Maker	Date
Over Printed Name	

CERTIFICATE OF EMPLOYMENT AND CREDIBILITY

Personnel Division/Unit:

This is to certify that the above loan applicant/borrower:

- (1) Is a permanent/ co-terminus employee of this office and is not on leave of absence without pay;
- (2) Has net pay of Php for the payroll and year of ; and
- (3) Has given the true and correct information on the Loan Application Form.

ARNIEL C. BAGAYAO

ADMINISTRATIVE OFFICER V

Legal Service/Unit:

This is to certify that the above loan applicant/borrower has no pending administrative nor civil case charge against him/her based on records on file with DepEd.

DAWN NOVERA T. ANCHETA

LEGAL OFFICER/ATTORNEY 111

SECRETARIAT’S ASSESSMENT/EVALUATION

A. Documents Submitted: (Two copies of each)

- ☐Loan Application Form (LAF)

☐Authorization to deduct

☐Photocopy of latest payslip

☐Additional documents for additional loan:

☐Request letter

☐Hospitalization/Medical Expenses

☐Photocopy of DepEd ID

☐Medical Abstract/Certificate/Prescription/Diagnosis

☐Barangay/LGU certificate/resolution declaring the borrower’s place under State of Calamity
- ☐Approved Appointment (for FIRST TIME Borrower’s and Co-terminus employees only)

☐Document showing proof that the co-terminus Employee has rendered at least 2 years In DepEd, e.g. Notarized Contract of Service

☐Others (specify) _____

Reviewed by:

Date:

B. Completeness and Veracity of Submitted Documents:

- ☐Signed and completely filled out LAF

☐Complete supporting documents for type of loan applied for

☐Signatures on LAF are by authorized signatories

Reviewed by:

Date:

C. Eligibility of Borrower and Co-Maker

Age:

☐Borrower will not reach the mandatory retirement age on or before the maturity of his/her loan.

Age:

☐Co-Maker will not reach the mandatory retirement age on or before the maturity of his/her loan.

☐Borrower has outstanding PF loan balance:

Current loan balance

Past due loans

No. of years/months past due

☐Borrower’s net take home pay after deduction of monthly amortization of the loan being applied for is equal or higher than the required threshold for the current year.

☐For renewal of loans: Borrower has paid at least 30% of the principal of the existing loan.

Percentage of principal paid:

Reviewed by:

Date:

D. Computation of Loan:

Principal amount of loan

PhP

Net take home pay after deduction

PhP

Less: Outstanding Balance of loan to be renewed

Monthly Amortization

PhP

Principal

Interest

Net Proceeds

PhP

Period of Loan (mm/yy-mm/yy)

Date Processed:

PhP

Processed by:

Remarks:

Signature over Printed Name

(PF Secretariat)

Reviewed by:

CHIQUI ZENY O. SAY-AWEN, CPA

ACCOUNTANT 111

(PF Secretariat)

ACTION TAKEN:

Recommending Approval:

CHIQUI ZENY O. SAY-AWEN, CPA

Head, PF Secretariat

Date:

☐Approved

☐Disapproved

BENILDA M. DAYTACA EdD, CESO V

Chairperson of the Board

Date:

AUTHORIZATION FOR SALARY DEDUCTION

Personnel Division

I hereby authorize the deduction of

PESOS (P _____) from my salary for _____ months, starting in
_____ 20 ____ to _____, 20 ____ or until my total outstanding loan of
_____ PESOS (P _____)
has been fully paid. Amount deducted shall be credited to the account of the DepEd Provident Fund
as receivables of the said loans.

Employee No.: _____ Status: _____
Division: _____ Code: _____ Signature over Printed Name
Designation: _____
Service: _____