



EMPLOYEE LOAN REQUEST

Name: _____ Date of Request: _____

Employee ID #: _____ Phone Number: _____

Department: _____ Date of Hire: _____

Do you currently have an outstanding employee loan? ☐ Yes ☐ No

If Yes; What is it for and balance remaining: _____

Amount of loan requested: _____

after 12 months of employment – maximum of \$1,000

after 18 months of employment - maximum of \$1,500

after 24 months of employment – maximum at the discretion of Executive Management

Reason for request: (Explain the circumstances giving rise to this request)

Repayment Terms (through payroll deductions):

☐ One Year (26 payments)

☐ Six Months (13 payments)

☐ Other _____

Approval: _____
President Signature Date

Human Resources Use Only:

Updated Payroll Company: ☐ Updated DAC: ☐

Amount per paycheck: \$ _____ Payroll Start Date: _____

HR Signature

Date

Accounting Use Only:

Check #: _____ Date Issued: _____

Accounting Signature

Date