



Republic of the Philippines  
Department of Education  
Provident Fund

Date Submitted: \_\_\_\_\_

Loan Application No. \_\_\_\_\_

Loan Amount: PhP \_\_\_\_\_

- Purpose:
- Educational
  - Hospitalization/Medical
  - Long Medication/Rehabilitation
  - House Arrears/Equity
  - House Repair - Major
  - House Repair - Minor
  - Payment of Loans from Private Institution
  - Calamity
  - Others (specify): \_\_\_\_\_

Type of Loan:  Multi-purpose  
 New  
 Renewal  
 Additional

Term: \_\_\_\_\_ year/s

**Borrower's Information**

**Co-Maker's Information**

(Surname) \_\_\_\_\_ (First Name) \_\_\_\_\_ (M.I.) \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Position: \_\_\_\_\_  
Employee No.: \_\_\_\_\_ Employment Status: \_\_\_\_\_  
Office: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Monthly Salary: PhP \_\_\_\_\_ Office tel. no. \_\_\_\_\_  
Years in Service: \_\_\_\_\_ Mobile no. \_\_\_\_\_  
DepEd E-mail address: \_\_\_\_\_  
Specimen Signatures: \_\_\_\_\_

(Surname) \_\_\_\_\_ (First Name) \_\_\_\_\_ (M.I.) \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Position: \_\_\_\_\_  
Employee No.: \_\_\_\_\_ Employment Status: \_\_\_\_\_  
Office: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Monthly Salary: PhP \_\_\_\_\_ Office tel. no. \_\_\_\_\_  
Years in Service: \_\_\_\_\_ Mobile no. \_\_\_\_\_  
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 installments 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.

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 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.

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

\_\_\_\_\_  
Signature of Borrower over Printed Name Date

\_\_\_\_\_  
Signature of Co-Maker over Printed Name Date

**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 month & year of \_\_\_\_\_; and  
(3) has given the true and correct information on the Loan Application Form.

**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.

\_\_\_\_\_  
Signature over Printed Name  
Designation: \_\_\_\_\_  
Date: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printed Name  
Designation: \_\_\_\_\_  
Date: \_\_\_\_\_



### Authorization for Salary Deduction

Personnel Division  
DepED , Meralco Ave., Pasig City

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 on the said loans.

Employee No. \_\_\_\_\_ Status: \_\_\_\_\_  
Division: \_\_\_\_\_ Code: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printer Name  
Designation: \_\_\_\_\_  
Service: \_\_\_\_\_



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Personnel Division  
DepED , Meralco Ave., Pasig City

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Division: \_\_\_\_\_ Code: \_\_\_\_\_

\_\_\_\_\_  
Signature over Printer Name  
Designation: \_\_\_\_\_  
Service: \_\_\_\_\_