

**AGAPE FINANCIAL OF NORTHWEST MICHIGAN
701 Westminster
Traverse City, MI 49686**

LOAN APPLICATION (Please print clearly)

APPLICANT INFORMATION (A co-applicant should complete a full application and submit the two applications together)		
Name of Applicant:	Address:	
Phone #:	Email address:	
Street Address:	Social Security #:	
City State Zip:	Drivers License #:	
Years/Months at above address:	Own/Rent ?:	Monthly Payment:
Prior address:	Years/Months at prior address:	

Primary Employer:	Starting Date:
Employer's Street Address:	Your position:
City State Zip:	Wages/Salary
Paydate schedule:	
Additional Employer:	Starting Date:
Employer's Street Address:	Your position:
City State Zip:	Wages/Salary
Paydate schedule:	
Past Employer:	Start & End Dates:
Employer's Street Address:	Your position:
City State Zip:	Wages/Salary
Supply additional past employers to cover at least 2 full years	

Other Sources of Household Income:	Amount of Income:
	Income schedule:
Marital Status:	Ages of children:
Other dependents in household:	Additional Information:
Cash on hand:	List other assets that could contribute to this financial need:

CURRENT OBLIGATIONS:

Name/Address of Mortgage Holder or Landlord:	Mortgage Balance if applicable:
Monthly Payment (Mortgage or Rent):	Includes property taxes and insurance?:
Estimated home value, if owned:	
Do you have a lien on a vehicle?	Make/Model/Year:
Loan Balance:	Monthly Payments:
Are you leasing?	
Installment Loans/Rent to Own:	Name of Lender:
Loan Balance:	Monthly Payments:
Credit Cards	Name of Lender:
Credit Balance:	Monthly Payments:
List all loans/credit cards on a separate piece of paper as necessary	

Bills/Payments Past Due:

Have you ever had property or items repossessed? When? Please explain:

Have you or your co-applicant ever declared bankruptcy? When? Please explain:

Are you a co-maker or guarantor on a loan? Amount and payments:

Monthly Alimony, Child Support or Child Care Payments:

Other obligations: With whom?

Monthly Payments:

LOAN INFORMATION

Loan Amount Requested:

Purpose:

How will this loan help you move toward achieving financial stability?

THE ATTACHED BUDGET FORM MUST BE COMPLETED AS PART OF THIS LOAN APPLICATION

AS PART OF THE APPLICATION PROCESS AND LOAN COMMITMENT, APPLICANT AGREES TO WORK WITH AN AGAPE-DESIGNATED FINANCIAL MENTOR PRIOR TO LOAN BEING GRANTED AND ON-GOING THROUGH THE TERM OF THE LOAN.

By submitting this application, you understand and agree that Agape Financial of Northwest Michigan ("we," "us" or "our"), as the prospective creditor and issuer of your Loan, will rely on the information provided here in making this credit decision, and you certify that such information is accurate and complete to the best of your knowledge. If we grant a loan based on this Application, you will be individually liable (or, for joint accounts, individually and jointly liable) for all authorized charges and for all fees as outlined in the Promissory Note. We may request consumer credit reports about you for evaluating this Application and in the future for reviewing the Loan Relationship, for servicing and collection purposes and for other legitimate purposes associated with your Loan. Upon your request, we will inform you if a consumer report was requested and, if it was, provide you with the name and address of the consumer reporting agency that furnished the report. By providing us with any telephone number used for a mobile or other wireless device now or in the future, including a number that you later convert to a cell phone number, you are expressly consenting to receiving communications - including but not limited to prerecorded or artificial voice message calls, text messages, and calls made by an automatic telephone dialing system - from us and our affiliates and agents regardless of the purpose of the communication. Calls and messages may incur access fees from your cellular provider. By signing above, you also agree that we may verify your employment, income, address and all other information provided with other creditors, credit reporting agencies, employers, third parties and through records maintained by federal and state agencies (including state motor vehicle departments) and waive any rights of confidentiality you may have in that information under applicable law. You agree that, in order to open and administer the Loan that may be established as a result of this Application, we, any mentors/facilitators designated by us and the correspondent agencies that may assist in this process (including but not limited to HelpLink and Family Partnership) may share certain information about you and your ongoing Loan activity. By submitting this Application, you certify that you read and understood the disclosures here and you agree to the terms of this Application.

Signature of Applicant

Date

Signature of Co-applicant

Date

FOR OFFICE USE:

Interviewer 1:

Date:

Assigned Financial Mentor:

Action Taken by:

Date:

Basic Budgeting Worksheet

Courtesy of BetterBudgeting.com

Total Monthly Gross Income		\$ _____
- Taxes, Health Ins. & Other Payroll Deductions	\$ _____	
- Savings, 401K, etc.	\$ _____	
= Total Monthly 'Spendable' Income		\$ _____

Housing Expenses	Monthly Payments
Rent or Mtg.	\$ _____
Utilities	\$ _____
Insurance (set \$ aside each month if paid annually)	\$ _____
Repairs (set \$ aside for future expenses)	\$ _____
Taxes (set \$ aside if paid annually)	\$ _____
= Total	\$ _____

Car Expenses	
Loan Payment(s)	\$ _____
Gas	\$ _____
Insurance (set \$ aside if paid annually)	\$ _____
Maintenance & Repairs (set \$ aside for future expenses)	\$ _____
= Total	\$ _____

Debts	
Creditor #1 _____	\$ _____
Balance _____	
Creditor #2 _____	\$ _____
Balance _____	
Creditor #3 _____	\$ _____
Balance _____	
Creditor #4 _____	\$ _____
Balance _____	
(figure more on back if needed)	
= Total	\$ _____

Miscellaneous

(Set \$ aside each month for annual expenses, such as Ins.)

Church Tithes & Offerings	\$ _____
Other Charitable Contributions	\$ _____
Groceries, Lunches, Meals Out	\$ _____
Childcare	\$ _____
School Tuition/Supplies	\$ _____
Medical Bills and CoPays	\$ _____
Prescription Medicines	\$ _____
Pet Supplies & Vet Exams	\$ _____
Entertainment, Cable, Video Rentals	\$ _____
Club Dues (Homeowner's Assoc., Fitness, etc...)	\$ _____
Newspaper, Magazine Subscriptions	\$ _____
Clothing	\$ _____
Haircuts	\$ _____
Gifts	\$ _____
Cash	\$ _____
Other (continue on back if needed)	\$ _____
= Total	\$ _____

Monthly Expense Totals

Housing	\$ _____
Car	\$ _____
Debts	\$ _____
Miscellaneous	\$ _____
= Total Expenses	\$ _____

Monthly Surplus or Shortage

(Total Spendable Income *minus* Total Expenses)

\$ _____

Dealing with Debt Worksheet

Courtesy of BetterBudgeting.com

Month _____ Year _____

Use this worksheet to manage your creditors and debts each month. Work towards getting them paid off as quickly as possible. You can do it!!!

Creditors/Debt s	Balance	Interest Rate	Finance Charges	Payment Made	New Balance
Debt 1					
Debt 2					
Debt 3					
Debt 4					
Debt 5					
Debt 6					
Debt 7					
Debt 8					
Debt 9					
Debt 10					
TOTALS		N/A			

Permission granted to photocopy for personal or non-profit use. Helpful tips for using this worksheet can be found at <http://www.betterbudgeting.com/budgetformsfree.htm>