INSTITUT MONETAIRE DE L'AFRIQUE DE L'OUEST



STAFF LOAN APPLICATION FORM

CURRENT APPLICATION

Name of Applicant	Position		
Loan Amount applied for (US\$)	Reason	Reason for the Loan	
Repayment Period in months	Monthly Deductions (US\$)	Start Date	End Date
Applicant's Signature	Date of Application	Departmental	Head's Signature
GUARANTOR I commit myself to paying in for named applicant, in case of an more than one member of staff			
Name of Staff Guarantor		Position	
Signature		Date	
FINANCE DIVISION YES NO Any previous application?	YES NO Is it within the max. 2 month	ths salary? Mont	thly Salary (US\$)
Current Indebtedness (US\$) If approved:	Monthly Deduction (US\$)	% to Monthly Salary	End Date
Total Indebtedness (US\$)	Monthly Deduction (US\$)	% to Monthly Salary	End Date
Chief Finance Officer's Signature		Date	
HUMAN RESOURCES UNIT	YES NO		
End Date of Staff Contract	Guarantor acceptable	If No, State Reason	
Last Appraisal Period Rating	HR Officer's Sign	ature	Date
RECOMMENDATION BY THE	DIRECTOR, FINANCE	<u>& ADMINISTRATION</u>	
Recommendation			
Signature		Date	
APPROVAL BY THE DIRECT	OR GENERAL		
Signature	Date	_	