Jewish Free Loan of Greater Portland Application

Note: This information will be kept confidential within the confines of the Jewish Free Loan Committee and Federation staff assigned to this program.

Applicant/Borrower Information

Requested Loan Amount (\$4000 maximum)	:	
Date:		
Purpose of loan:		
Name:	Maiden Name (if applicable):	
Date of Birth (minimum 18 yo):		
Driver's License #:	Social Security #:	
Home Address:		
Years at current residence:	Own/Rent?	
If less than 2 years, previous address:		
Home Phone:	Cell Phone:	
Work Phone:	Email:	
Employer:	Position:	
Business Address:		
Business Phone:	Years employed:	
If less than 2 Years, please add prior Employer:		
Employer #2:	Position:	
Business Address:		
Business Phone:	Years employed here:	
If unemployed, for how long?		
Secondary Contact (non-spouse):		
Phone: Email:		
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Spouse/Partner/Co-Borrower Information (if applicable)

Date of Birth:
Social Security #
Work Phone:

Email:

Employer:	Position:	
Business Address:	Vegus a realizado	
Business Phone:	Years employed:	
If Less than 2 Years, please add pri	or Employer:	
Employer #2:	Position:	
Business Address:		
Business Phone:	Years employed here:	
If unemployed, for how long?		
Guarantor Information		
Name: Time known:	Relationship to Borrower:	
2 ND Guarantor Information (required if loan request is over \$2,000)		
Name: Time known:	Relationship to Borrower:	
General Information		
How did you hear about us? Have you sought funds from other organizations or sources? If yes, please share source(s) and amount(s). Have you or any immediate family ever received a free loan? If yes, please share details.		
Income/Expense Worksho	eet for Borrower and Co-Borrower (if applicable)	
MONTHLY INCOME Salary Social Security/SSI Other Total Income		
rotal income		

MONTHLY EXPENSES Rent/Mortgage Auto Loan Utilities Credit Card Child Support	
Other Total Expenses	\$
Certification	
date(s). 2. Agree that this application is the property JFLGP to verify the accuracy and completeness of al married or am a registered domestic partner and ar authorization extends to verifying information about	t my spouse or partner. 4. Authorize JFLGP to answer about JFLGP's experience with me and to discuss all
Applicant Signature:	Date:
If Spouse/Partner is jointly applying for this loan, ple Spouse/Partner Signature:	ease sign and date below. Date:
Please include with your completed application: • Copy of Driver's License	

• Most recent paystub (or other proof of income, e.g. SSI). Please include documentation of current year-to-date income if possible.

Note: Additional information may be required for loan approval

Application can be mailed to:
Jewish Free Loan of Greater Portland
c/o Jewish Federation
6680 SW Capitol Hwy
Portland, OR 97219