

# School Fees Advance Application Form



Guaranty Trust Bank plc  
RC 152321

## Personal Information

Account No.:

Account Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Personal E-Mail Address: \_\_\_\_\_

Mobile 1: \_\_\_\_\_

Mobile 2: \_\_\_\_\_

Marital Status: Married  Single  Others   
(Please specify)

## Employment Details

Name of Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Employer's Phone (Human Resources Dept.): \_\_\_\_\_

Office E-mail Address: \_\_\_\_\_

Nature of Employment: Permanent  Contract  Employment Status: Unconfirmed  Confirmed

Level: Junior Staff  Senior Staff  Management Staff  Job Function: \_\_\_\_\_

Length of Service with Current Employer: Year(s)  Month(s)  Monthly Salary Payment Date: \_\_\_\_\_

Gross Annual Salary (N): \_\_\_\_\_ Net Annual Salary (N): \_\_\_\_\_ Net Monthly Salary (N): \_\_\_\_\_

## Existing Borrowing(s) with GTBank

Items	Facility I	Facility II	Facility III
Type of Loan			
Outstanding Balance (N)			
Outstanding Tenor			
Repayment Amount			
Frequency of Repayment (monthly or quarterly)			

## Facility Details

Loan Amount (N): \_\_\_\_\_

Total School Fees (N): \_\_\_\_\_

Number of Children/Ward(s): \_\_\_\_\_

Tenor: \_\_\_\_\_ Months



# School Fees Advance Employer Undertaking



Guaranty Trust Bank plc  
RC 152321

The Head,  
Human Resources

\_\_\_\_\_  
\_\_\_\_\_

Dear Sir/Ma,

Consumer Loan Application for \_\_\_\_\_  
(Applicant's Name)

We have received a request for a consumer loan from the above named employee of your organization. In order to process the loan, kindly confirm the following information provided by him/her:

## Information to be confirmed

Job Function: \_\_\_\_\_

Period Spent in Service: Year(s)  Month(s)

Nature of Employment: Permanent  Contract

Employment Status: Unconfirmed  Confirmed

Net Monthly Salary (N): \_\_\_\_\_

Annual Compensation Package (N): \_\_\_\_\_

Date of Employment:       
Day Month Year

Loan Amount (N): \_\_\_\_\_

## List existing credit obligation(s) deducted at source

S/n	Loan Type	Monthly Deduction	Outstanding Amount

I \_\_\_\_\_ hereby request my employer to unconditionally and irrevocably do the following:

1. Domicile my salary with Guaranty Trust Bank plc.
2. Pay my benefits (other than pension entitlements) through the same account in Guaranty Trust Bank plc, in the event of my separation from the company before the liquidation of the loan.

I am fully aware of the implications of the above terms and conditions of this document and hereby affirm the execution of same.

\_\_\_\_\_  
Applicant's Signature

Date      
Day Month Year

## To be completed by employer

A. We confirm that the above information as provided by our employee is accurate Yes  No

B. The residential address of the employee as held in our record is \_\_\_\_\_  
\_\_\_\_\_

C. If the application is considered and a loan is granted, we certify as follows:

1. Continue to pay his/her salary into account No. \_\_\_\_\_ with your Bank.
2. No change of Bank account will be effected without a written confirmation from GTBank of due liquidation of the loan.
3. Notify you of the exit of the applicant from the company with immediate effect.

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Signature: \_\_\_\_\_

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

\_\_\_\_\_  
Official Stamp/Seal