

Application Form

SC & HSC EXAMINATION LOAN SCHEME

(5% Interest Rate)

FORM NO. _____

DATE OF APPLICATION: ___/___/___

The EWF reserves the right to reject any application not satisfying the general requirements or is not in the best interest of the Fund.

PART I Borrower / Personal Data

Surname: _____ Mr Mrs Miss

Other Names: _____ Maiden Name: _____

Address: _____ Email: _____

N.I.C No: _____

Telephone Nos: _____ (Home) _____ (Office) _____ (Mobile)

PART II Details of Employment

Name of Employer: _____

Occupation: _____

Salary: _____

PART III Student / Ward Details

Surname: _____ SC HSC

Other Names: _____ Name of College / Institution: _____

National Identification No: _____

Telephone Nos: _____

PART IV Details of Examination Loan

(Attached evidence from College/Institution)

Fees to be paid: Rs _____

Cheque in favour of college / institution

Directly to Mauritius Examinations Syndicate

Have you any previous loan (*education, welfare or examination loans*) with EWF? Yes No

If in the affirmative, please indicate which loan, amount and date contracted _____

Undertaking

I acknowledge having contracted a SC / HSC examination loan to finance the examination fees of my ward as described in Part III & IV above and undertake to repay the loan by equal monthly and consecutive installments of Rs _____ in _____ months; each such installment shall be calculated as per the table of the Fund and shall represent an installment of the principal amount and of interest rate at 5% p.a. and shall be paid on the last day of each month.

Signature: _____ Date: ___/___/___

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Details of any previous loan: _____

Amount due (if any): _____

Arrears (if any): _____

Verified by: _____ Date: ___/___/___

PART V**Details of Guarantor**

Surname: _____

Mr Mrs Miss

Other Names: _____

Maiden Name: _____

Address: _____

Email: _____

National Identification No.: _____

Telephone Nos.: _____ (Home) _____ (Office)

_____ (Mobile)

Name of Employer: _____

Occupation: _____

Salary: _____

Bank Details: Name & Branch _____

Account No.: _____

Have you ever guaranteed any other applicant? Yes No

If in the affirmative, please give details _____

Undertaking

As guarantor, I bind myself jointly and in solido to repay in full to the Employees Welfare Fund any amount which may be due to the Fund in respect of the loan and the interest thereon, should the borrower fail to honour his/her commitment immediately when it becomes due or on resignation or on dismissal from his/her employment, or otherwise fail to repay the said loan as per the terms set out above.

**Please write in words and in your own handwriting the amount of loan contracted starting with "Goods for the sum of rupees....."* _____

Guarantor's Signature: _____

Date: ___/___/___

SC & HSC EXAMINATION LOAN SCHEME

LIST OF COMPULSORY DOCUMENTS REQUIRED (COPY & ORIGINAL)

REQUIREMENTS FOR APPLICATION		Comments	Verified By
1	Statement from NSF (Private & Parastatal bodies)		
2	Statement from Employer /Ministry (permanent post, date joined , not on LWP, not under report, seal of Co.)		
3	National Identification Card for applicant and student(if applicable)		
4	Birth Certificate for applicant and student		
5	Marriage Certificate (if applicable)		
6	Payslip of borrower		
7	Evidence of fees from the College / MES		
8	Proof of address (recent utility bill)		
9	If repayment is through Bank Standing Order, to provide Bank Statement where salary is credited		
REQUIREMENTS FOR GUARANTOR		Comments	Verified By
1	Statement from Employer /Ministry (permanent post, date joined , not on LWP, not under report, seal of Co.)		
2	National Identification Card		
3	Birth Certificate		
4	Marriage Certificate (if applicable)		
5	Payslip		
6	Proof of address (recent utility bill)		
7	If repayment is through Bank Standing Order, to provide Bank Statement where salary is credited		

IMPORTANT NOTES FOR APPLICANT

- 1.0 Only members of NSF, not receiving any grant or loan facilities are eligible for the SC & HSC Examinations Loan Scheme**
- 2.0 No moratorium on loan**
- 3.0 Period of reimbursement will be for a maximum of 24 months**

FOR OFFICE USE ONLY

<p>RECEPTION</p> <p>Taken By: _____</p> <p>Date: ____/____/____</p> <p>Comments: _____</p> <p>_____</p> <p>Signature: _____</p>	<p>ADMINISTRATION</p> <p>Input By: _____</p> <p>Date: ____/____/____</p> <p>Comments: _____</p> <p>_____</p> <p>Signature: _____</p>	<p>Examined By: _____</p> <p>Date: ____/____/____</p> <p>Comments: _____</p> <p>_____</p> <p>Signature: _____</p>
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<p>APPROVED BY</p> <p>Name: _____</p> <p>Designation: _____</p> <p>Signature: _____</p> <p>Date: ____/____/____</p>	<p>PROCEED WITH DISBURSEMENT</p>
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