

**Loan Form (Updated on 20.08.2021)**

*(In the case of Online Filling, Press Ctrl + S to save the form & no need for the signature.)*

**Section 1:**

Employee Name: ..... Employee Code: .....  
Designation: ..... Department: .....  
Date of Joining: ..... Contact No.: .....  
Requested Loan Amount (In INR): ..... Date: .....

Purpose for Loan	Loan Amount (In INR)	Repayment Duration (In Months)	EMI Amount (In INR)

Employee Signature: .....

- After filling, please send this form to Section 2.

**Section 2: Concern HOD:**

Approved  Disapproved

- If disapproved, please give it back to the originator.
- It is certified that the above loan is for genuine need.

Name: ..... Department: .....  
Signature: ..... Date: .....

- Forward/ Handover the form to Section 3A.

**Section 3A: HR Department:**

Full & Final (F&F) Value on Current date: .....

Eligible Amount (As per Loan Policy): .....

1. I have checked that the eligible amount is within the limit as per the policy.
2. If eligibility is less than the asked amount, inform the employee and if he is OKAY with new eligibility then get a new monthly repayment plan.
3. New loan amount and repayment plan:

Loan Amount (In INR)	Repayment Duration (In Year/ Months)	EMI Amount (In INR)

4. It is verified & approved to disburse the following amount to the concerned employee.

Final Amount: .....

Name: ..... Signature: ..... Date: .....

- Forward/ Handover the form to Section 3B  or Section 4 as applicable.



**Section 3B: Management (For HR Head Only):**

Approved  Disapproved

- If disapproved, please give it back to the originator.

Remark (if any): .....

Name: ..... Signature: ..... Date: .....

- Please forward this form to Section 4.

**Section 4- Accounts Department:**

1. Check that he has not taken loans more than once in last five years, if so, please send the form back to the originator.
2. Check previous approvals.
3. Disburse the approved amount mentioned in point 4 of Section 3A.
4. Mark the repayment plan in this sheet and also inform HR for monthly debit.
5. Repayments:

Month	EMI	Total Debt

Name: ..... Signature: ..... Date: .....

----- *End of Form* -----

