

# EMERGENCY LOAN PAYMENT EXTENSION/DEFERMENT FORM

MEMBER NAME:		DATE:
ACCOUNT/LOAN#:		Phone#:
LOAN TYPE:	LOAN BALANCE:	NEXT DUE DATE:

## EMERGENCY LOAN PAYMENT QUESTIONS

- When was your last day of work? \_\_\_\_\_
- When are you scheduled to return to work, if known? \_\_\_\_\_
- Have you filed for unemployment?  Yes  No
  - If YES, when did you file? \_\_\_\_\_
- If you are still working, are you experiencing loss of income due to your employer's limited operations?  Yes  No
  - Amount of loss of income? (new monthly amount): \$ \_\_\_\_\_
  - How long will your employer be limiting operations, if known?  Weeks  Months
- Is your employer offering you paid leave?  Yes  No
  - Type of paid leave:  Vacation  Sick  PTO  Sick PTO  FMLA PTO  Other
  - Amount of paid leave? \$ \_\_\_\_\_  Hourly  Weekly  Monthly
- If applicable, is your co-borrower experiencing a loss of income?  Yes  No
  - Amount of loss of income (Monthly Amount): \$ \_\_\_\_\_
- Do you have any supplemental income?  Yes  No
  - Type of supplemental income:  SS  Disability  Pension  Financial Aid  Cash Tips  Other
  - Amount of supplemental income (Monthly Amount): \$ \_\_\_\_\_
- Any other comments not noted above:

### CREDIT UNION USE ONLY

Teller # \_\_\_\_\_ Teller Name \_\_\_\_\_ Branch \_\_\_\_\_  
 Request Date \_\_\_\_\_ Approval Date \_\_\_\_\_ Approved By \_\_\_\_\_  
 Notes: \_\_\_\_\_