

**GRENADA DEVELOPMENT BANK**  
**SPECIAL STUDENT LOAN PROGRAMME**  
**APPLICATION FORM**

**Application No.:** .....

**1. Personal Information**

Name of Student: .....  
Last Name First & Other Names

Address: .....

Mailing Address (if different from above): .....

Telephone No: Home ..... Work ..... E-mail Address .....

Date of birth: ..... Place of Birth: ..... Nationality/Citizenship: ..... ID No.: .....

Sex: Female ..... Male ..... Status: Single [ ] Married [ ] Divorced [ ] Separated [ ]

Employed [ ] Unemployed [ ] Full-time Student [ ] Part-time Student [ ]

If employed, what is your occupation?: ..... Name and Address of Employer: .....

..... Salary per month: \$..... Total Savings: .....

**2. Academic Record - Applicant Must Provide Evidence of Qualifications.**

Name of Institution	Year(s) Attended	Certificate (e.g. CXC, CAPE, GCE 'O' or 'A' Level)/ Diploma/Degree Awarded

**3. Course of Study:**

**New Student:**

Course of Study: ..... Institution: .....  
**(Please Attach Copy of Acceptance Letter)**

Duration of the Course: ..... When will you start the course?: .....

Residence during course of study: Campus [ ] Family's home [ ] Rental/Other accommodation [ ]

**Continuing Student:**

Name of Institution: ..... Course of Study: .....

When did you start the course?: ..... When will you finish the course?: .....

Examinations passed to date. **(Please Attach Transcripts):**.....

**4. Family Information:**

Mother's Name:	Father's Name:	Guardian's Name:
Address:	Address:	Address:
Telephone No.:	Telephone No.:	Telephone No.:
Occupation:	Occupation:	Occupation:
Employer:	Employer:	Employer:
No. Years with Employer:	No. Years with Employer:	No. Years with Employer:
Annual Salary (\$):	Annual Salary (\$):	Annual Salary (\$):
Number: Brothers ..... Sisters ..... Other Dependents .....		Size of Family:

Spouse's Name: ..... Spouse's Address: .....

Spouse's Telephone No.: ..... Spouse's Occupation: .....

Spouse's Employer: ..... Number of Dependents: .....



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**FINANCIAL DECLARATION**

FORM CD 007

**MONTHLY HOUSEHOLD BUDGET**

NAME OF APPLICANT(S):.....

How much does your household earn each month?

INCOME:

- 1. Gross Monthly Income: \_\_\_\_\_ \$ \_\_\_\_\_
- 2. Less Deductions \_\_\_\_\_ \$ \_\_\_\_\_
- 3. Net Take Home Pay: \_\_\_\_\_ \$ \_\_\_\_\_
- 4. Add- Spouse's Monthly Income (if employed full-time) \_\_\_\_\_ \$ \_\_\_\_\_
- 5. Add - Other Income (specify) \_\_\_\_\_ \$ \_\_\_\_\_
- 6. Net Monthly Income \_\_\_\_\_ \$ \_\_\_\_\_

How much does your household spend each month on the following?

EXPENDITURE:

7. Shelter

- (a) Mortgage (including taxes ) or Rent \_\_\_\_\_ \$ \_\_\_\_\_
- (b) House Insurance \_\_\_\_\_ \$ \_\_\_\_\_
- (c) Maintenance and Repairs to Property \_\_\_\_\_ \$ \_\_\_\_\_
- (d) Gas \_\_\_\_\_ \$ \_\_\_\_\_
- (e) Electricity \_\_\_\_\_ \$ \_\_\_\_\_
- (f) Telephone \_\_\_\_\_ \$ \_\_\_\_\_
- (g) Water \_\_\_\_\_ \$ \_\_\_\_\_
- TOTAL \_\_\_\_\_ \$ \_\_\_\_\_

8. Transportation: Do you or your family own a motor vehicle? Yes ( ) No ( )

If yes, how much is spent each month on the following:

- (a) Licence \_\_\_\_\_ \$ \_\_\_\_\_
- (b) Insurance \_\_\_\_\_ \$ \_\_\_\_\_
- (c) Operating Cost \_\_\_\_\_ \$ \_\_\_\_\_

If no, how much is spent each month on:

- (d) Public Transportation \_\_\_\_\_ \$ \_\_\_\_\_
- TOTAL \_\_\_\_\_ \$ \_\_\_\_\_

9. Living Expenses:

- (a) Food \_\_\_\_\_ \$ \_\_\_\_\_
- (b) Clothing \_\_\_\_\_ \$ \_\_\_\_\_
- (c) Medical and Dental \_\_\_\_\_ \$ \_\_\_\_\_
- (d) Life Insurance \_\_\_\_\_ \$ \_\_\_\_\_
- (e) Other (specify) \_\_\_\_\_ \$ \_\_\_\_\_
- TOTAL \_\_\_\_\_ \$ \_\_\_\_\_

10. Installment Obligations:

- (a) For Motor Vehicle \_\_\_\_\_ \$ \_\_\_\_\_
- (b) For Furniture, Appliances, etc. \_\_\_\_\_ \$ \_\_\_\_\_
- (c) Bank Loan (specify) \_\_\_\_\_ \$ \_\_\_\_\_
- (d) Credit Union loan (specify) \_\_\_\_\_ \$ \_\_\_\_\_
- (e) Credit Card \_\_\_\_\_ \$ \_\_\_\_\_
- (f) Other (specify) \_\_\_\_\_ \$ \_\_\_\_\_
- (g) Payment on Proposed Student Loan \_\_\_\_\_ \$ \_\_\_\_\_

11. Monthly Savings \_\_\_\_\_ \$ \_\_\_\_\_

12. Total Monthly Commitments (Add Total in Lines 7 to 11) \_\_\_\_\_ \$ \_\_\_\_\_

13. Balance (Line 6 minus Line 12) \_\_\_\_\_ \$ \_\_\_\_\_

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Form CD 007

**STATEMENT OF AFFAIRS**

**ASSETS**

**LIABILITIES**

Cash	\$.....	Amount due to Banks	\$ .....
Savings	\$.....	Amount due to Credit Unions and Associates	\$ .....
Life Insurance Policies: Cash Value	\$.....	Due to Merchants and Others	\$.....
Building/House	\$.....	Outstanding Rates and Taxes	\$.....
Freehold Land	\$.....	Other Liabilities (List)	
Livestock	\$.....	.....	\$ .....
Motor Vehicle(s)	\$.....	.....	\$ .....
Shares	\$.....	.....	\$ .....
Other Assets (List)			
.....	\$.....		
.....	\$.....		
.....	\$.....		
<b>Total Assets</b>	<b>\$.....</b>	<b>Total Liabilities</b>	<b>\$.....</b>

Name and Branch of Applicant's financial institution:

Commercial Bank: .....

Credit Union: .....

Building Society: .....

Indicate with a (√) the type of Account(s) held with the following financial institutions:

Type of Account	Commercial Bank	Credit Union	Building Society
Savings			
Deposit			
Chequing			
Loan			
Credit Card			
Shares			

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Financial Declaration

Form CD 007

**Details of Liabilities (\$):**

Name of Lender	Loan Amount	Loan Balance	Monthly Payment	Interest Rate (%)	Loan Term	Maturity Date	Security being held
<b>TOTAL</b>							

**Comments:**

.....

.....

.....

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Applicant's Signature: .....

Date: .....

Applicant's Signature: .....

Date: .....