

# Consumer Loan Assessment Form

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

Application Number: \_\_\_\_\_

## Borrower Information

Full Name	_____
Date of Birth	_____
Address	_____ _____
Contact Number	_____
Email	_____

## Employment & Financial Details

Employer Name	_____
Position/Title	_____
Years Employed	_____
Monthly Income	_____
Other Income Sources	_____

## Loan Details

Loan Amount Requested	_____
Purpose of Loan	_____
Preferred Loan Term (months/years)	_____

## Liabilities & Obligations

Creditor	Type of Debt	Monthly Payment	Outstanding Balance
_____	_____	_____	_____
_____	_____	_____	_____

## Assessment & Recommendation

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

Assessment Notes:

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

Recommendation:

- Approve
- Decline
- Request More Information

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

