

## ADDITIONAL INFORMATION FORM

Residential Address.....  
 Landmark..... LGA..... NO of years at current address.....  
 BVN NO ..... Date of Birth...../...../..... State of origin .....

### Next of kin

Name ..... Relationship .....  
 Address .....  
 Phone number .....

### Parent / Spouse information (For self sponsoring students)

Spouse / Parents name ..... Phone NO .....  
 Spouse business / office address .....

### Student Information

course of study ..... level / year.....

### Business / office information

Name of company .....  
 Address .....  
 Position ..... Number of years in company.....  
 Contact person ..... Phone number .....  
 Monthly net income ..... Monthly expenses .....

### DETAILS OF LOAN REQUEST

LOAN AMOUNTS .....

PURPOSE OF LOAN.....

TENURE ..... COLLATERAL .....

OUTSTANDING LOAN IN OTHER INSTITUTIONS

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### AUTHORIZATION

I confirm that the above information is true, correct and complete to the best of my knowledge. I agree to co-operate by giving all the information required to do a business assessment. I am aware that any false statement may be an immediate cause for denial of this or any future loan requests. This authorization includes obtaining and using my information from credit bureaus, suppliers, commercial banks, microfinance banks, rural banks, and all other creditors while releasing these institutions from liability under any and all bank secrecy laws. I am aware that the signature on this form does not guarantee the granting of a loan. The institution reserves the right to reject this loan request or adjust the terms of the transaction in line with its policies

Applicant's signature ..... Date .....

**GUARANTOR'S INFORMATION FORM**

Title.....  
 Surname ..... Other Name.....  
 Phone No(S)..... BVN NO .....  
 Residential Address.....  
 Landmark..... LGA.....  
 Spouse name ..... Phone NO .....

**BUSINESS INFORMATION**

BUSINESS NAME / COMPANY NAME.....  
 ADDRESS .....  
 POSITION IN OFFICE..... NET MONTHLY INCOME .....  
 CUSTOMER NAME .....  
 RELATIONSHIP TO CLIENT .....  
 AMOUNT WILLING TO GUARANTEE .....

I declare that the information provided here is correct; furthermore, I authorize EDFIN MFB LTD to seek character or credit references, in addition to whatever additional information is required from any source.

.....  
 Prospective Guarantor Signature ..... Date

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 Relationship Officer Name & Signature ..... Date