In the Name of God, the Most Compassionate, the Most Merciful

SEPAUS FOUNDATION

P. O. Box 7375, Capistrano Beach, CA 92624, USA

Tel: 949-584-8206

Human beings are from the same chain, God made us from the same grain, If one link is left in pain, We all in despair will remain.

Applicant Information				www.sepausfoundations.com	
First Name:	Last Name:			Date of Birth:	
Address:				Own Rent	
Telephone:		Fax:		E-Mail:	
Number of Years at Above Address: Monthly Mortgage or Rent:					
Social Security No.:			Drivers License No	:	
Education and Exper	riences:				
Type of Residency:	Citizen	Green Card	Student Visa	Asylum Tourist Visa	
Marital Status:	☐ Single	☐ Married	Divorced	□Widow	
Spouses Name:	uses Name: Occupation:		on:	Number of Children:	
Name of the person or organization that referred you to Sepaus foundation:					
Applicant Employment and Income Information					
Job Title:		Con	npany Name:		
Employer Address: _	Employer Telephone:				
Number of Years at this Job: Total Monthly Income: \$					
Loan Information					
Purpose of this Loan	າ:	Loan Ar		Loan Term:	
(maximum loan \$3,000) (must be under one year)					
Guarantor Information and Note					
Guarantor Name:		Guarantor Telephone No.:			
Guarantor Address:			Guara	antor Employment:	
Guarantor Note: I, _	I,, promise to pay the entire balance of the loan, if for any reason the				
above applicant fails to pay. Signature:		Date:			
Applicant Signature					
I declare that I have examined this application and that it is true, correct and complete.					
Signature:				Date:	

SEPAUS reserves the right to accept or reject any application, withdraw the loan approval and vary the loan terms and conditions without explanation and/or prior notice.