

PERSONAL DATA FORM
INDIAN AGRICULTURAL PROGRAM OF ONTARIO
APPLICANT INFORMATION

Date: _____

Name: _____

First	Middle	Last
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Address: _____

Phone Number: _____ Cell Number: _____

Email Address: _____ SIN Number: _____

Date of Birth (M/D/YR): _____

Band: _____ Band Number: _____ District: _____

EDUCATION OF APPLICANT:

LAST GRADE COMPLETED: _____ SCHOOL/COLLEGE/UNIVERSITY: _____

OTHER TRAINING: _____

PLACE OF EMPLOYMENT:

EMPLOYER & ADDRESS: _____

YEARS OF SERVICE: _____ ANNUAL SALARY: \$ _____ VERIFICATION _____

PREVIOUS EMPLOYER & ADDRESS: _____

YEARS OF SERVICE: _____ ANNUAL SALARY: \$ _____

FAMILY INFORMATION

NAME OF SPOUSE OR PARTNER: _____

DATE OF BIRTH (M/D/YR): _____

EMPLOYER & ADDRESS: _____ ANNUAL SALARY: \$ _____

NUMBER OF DEPENDENTS: _____
(INCLUDING SPOUSE & PARTNER)

BANK

NAME: _____ ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

CREDIT STATUS (EXPLAIN ANY COLLECTIONS OR JUDGEMENTS):

INCOME & EXPENSE FOR YEAR ENDING: _____

INCOME:	MONTHLY	YEARLY	NEXT YEAR
Income from employment	\$	\$	\$
Income from farming	\$	\$	\$
Income from other sources	\$	\$	\$
Income from self employment	\$	\$	\$
Total Household Income	\$	\$	\$

HOUSEHOLD EXPENSES	MONTHLY	YEARLY	NEXT YEAR
Heat	\$	\$	\$
Hydro	\$	\$	\$
Phone	\$	\$	\$
Groceries	\$	\$	\$
Family	\$	\$	\$
Rent	\$	\$	\$
Insurance – home	\$	\$	\$
Insurance – vehicle	\$	\$	\$
Repairs and Maintenance – home	\$	\$	\$
Repairs and Maintenance – vehicle	\$	\$	\$
Other	\$	\$	\$
Payments – Credit Card	\$	\$	\$
Payments - Loans	\$	\$	\$
Total Expenses	\$	\$	\$
Surplus	\$	\$	\$

Notes:

HOUSEHOLD BALANCE SHEET FOR: _____

DATE: _____

ASSETS	DESCRIPTION	DOLLAR AMOUNT
CASH		
INVESTMENTS – IE GIC		
RECEIVABLES		
VEHICLE		
VEHICLE*		
EQUIPMENT*		
HOUSEHOLD CONTENTS		
HOME		
OTHER PROPERTY*		
TOTAL ASSETS		\$

*NOT LISTED IN FARM BALANCE SHEET

LIABILITIES	REPAYMENT TERMS	DOLLAR AMOUNT
PAYABLES (BILLS DUE)		
CHARGE ACCOUNTS		
CREDIT CARDS		
LOANS		
OTHER (SPECIFY)		
TOTAL LIABILITIES		\$

NET WORTH = TOTAL ASSETS – TOTAL LIABILITIES	\$
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NOTES:

STATEMENT OF CREDIT

I certify that to my best of my knowledge the information given on this application is true and correct. The Indian Agricultural Program of Ontario is hereby authorized to check the accuracy of the information and obtain credit reports on me and each source is hereby authorized to provide such information. I agree to indemnify Indian Agricultural Program of Ontario against and save it harmless from any and all claims in damages otherwise arising from such disclosure on its part.

DECLARATION

The statements herein are made for the purposes of obtaining the loan/guarantee and are true to the best of my knowledge and belief.

Witness: _____ Applicant: _____

Date: _____ Spouse: _____
Or Partner if a Corporation

Loan Information –
Loan Purpose:

Proposed Payment Details:

Method (i.e. PAC, CK, etc): _____

Frequency (i.e. monthly, annual, etc): _____

Amount: _____

Date of first withdrawal: _____