

**SHELL EMPLOYEES SAVINGS & LOAN ASSOCIATION, INC.**

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| By filling out this Form and by affixing your specimen signature below, you hereby confirm the following: | | | | | | | | |  |  |
| 1.That you have been duly notified and informed about the purpose of processing your personal information. | | | | | | | | |  |  |
| 2.That you have given your expressed consent and authorize SESLA, its officers, staff and duly authorized Data Processors to process your personal | | | | | | | | | | |
| information for the purpose of processing your application with SESLA. |  |  |  |  |  |  |  |  |  |  |
| 3.That you have authorized SESLA, its officers, staff and duly authorized data processors to validate the authenticity of all the information contained | | | | | | | | | |  |
| herein as well as all the documentary requirements you have submitted herewith with the Data Controllers that have custody of such information. | | | | | | | | |  |  |
| 4.That you have authorized SESLA, its officers, staff and its duly authorized Data Processors to control your personal information until the duration of your | | | | | | | | | | |
| membership with SESLA and that you further authorize SESLA to destroy and delete such personal information upon the cessation of your application. | | | | | | | | | | |

**SESLA MEMBER EVALUATION SHEET**

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| **PERSONAL INFORMATION** |
| **NAME :** |
| **STAFF NO. WORKBASE COMPANY**   |  |  |  | | --- | --- | --- | |  |  |  | |
| **TENURE OF SERVICE: DATE OF EMPLOYMENT (FROM TO PRESENT)**   |  |  | | --- | --- | | **(DD/MM/YY) -** | **(DD/MM/YY) -** | |
| **HOME ADDRESS :** |
| **YEARS AT PRESENT ADDRESS** |
| **CONTACT INFORMATION :**   |  |  |  |  | | --- | --- | --- | --- | | **OFFICE PHONE NO. & EXT.** | **RESIDENCE PHONE NO.** | **MOBILE NO.** | **EMAIL ADDRESS** | |  |  |  |  |   **MARITAL STATUS** |
| |  |  |  |  | | --- | --- | --- | --- | | **SINGLE** | **MARRIED** | **WIDOW/ER** | **SEPARATED** | |
| **SPOUSE’S PERSONAL INFORMATION** |
| **SPOUSE’S FULL NAME:** |
| **SPOUSE’S EMPLOYER’S BUSINESS NAME & ADDRESS :** |
| |  |  |  | | --- | --- | --- | | **SPOUSE’S OFFICE PHONE NO. & EXT.** | **SPOUSE’S MOBILE NO.** | **SPOUSE’S EMAIL ADDESS** | |
| |  |  | | --- | --- | | **SPOUSE’S POSITION:** | **SPOUSE’S MONTHLY INCOME:** | |
| **FINANCIAL INFORMATION** |
| **DO YOU OWN A CREDIT CARD?** |
| |  |  |  |  | | --- | --- | --- | --- | | **CARD NAME** | **CARD TYPE** | **CREDIT LIMIT** | **OUTSTANDING BALANCE** | |  |  |  |  | |
| **HOME OWNERSHIP** |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **OWNED** | **RENTED** | **MORTGAGED** | **LIVING W/ RELATIVE** | **BOARDING** | **MONTHLY RENTAL/ AMORTIZATION** | |
| **CAR OWNERSHIP** |
| |  |  |  |  | | --- | --- | --- | --- | | **NO. OF CARS OWNED** | **OWNED** | **MORTGAGED** | **MONTHLY AMORTIZATION** | |
| **DO YOU HAVE ANY EXISTING LOAN TO OTHER LENDING COMPANIES?** |
| |  |  |  |  | | --- | --- | --- | --- | | **COMPANY NAME, ADDRESS & CONTACT #** | **TYPE OF LOAN** | **OUTSTANDING BALANCE** | **MONTHLY AMORTIZATION** | |  |  |  |  | |
| **NUMBER OF DEPENDENTS** |
| |  |  |  |  | | --- | --- | --- | --- | | **NAME** | **BITHDATE** | **AGE** | **RELATIONSHIP** | |  |  |  |  | |
| **DO YOU HAVE A BANK ACCOUNT?** |
| |  |  |  | | --- | --- | --- | | **BANK NAME / BRANCH** | **TYPE OF ACCOUNT** | **NO. OF YEARS** | |  |  |  |   **OTHER SOURCES OF INCOME:** |
| **NATURE OF BUSINESS:** |
| |  |  |  | | --- | --- | --- | | **SINGLE PROPRIETORSHIP** | **PARTNERSHIP** | **CORPORATION** | |

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SIGNATURE OVER PRINTED NAME DATE