**Visa /British Citizenship**

**Loan Application Form**

There are significant costs associated with applying for a Visa/British Citizenship and an interest-free loan for staff is available to help fund these personal costs. If you wish to apply for a loan, please complete the application below and forward to the Human Resources Department at Hawkshead for approval.

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name** |  | | |
| **Employee/Payroll No.** |  | **RVC Start Date** |  |
| **Job Title** |  | | |
| **Department** |  | | |
| **Line Manager Name** |  | | |
| **Head of Department** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Please provide full details for your loan application, and a full breakdown of costs where appropriate. For a Visa related loan for family members, please ensure the costs are separately detailed.** | | | |
| **1** | **Loan item cost detail** |  | £ |
| **2** | **Loan item cost detail** |  | £ |
| **3** | **Loan item cost detail** |  | £ |
| **4** | **Loan item cost detail** |  | £ |
| **5** | **Loan item cost detail** |  | £ |
| **6** | **Loan item cost detail** |  | £ |
| **TOTAL LOAN REQUIRED** | | | **£** |

NB. Separate Loans cannot exceed £2,000. Total Loans from the RVC to not exceed £10,000

**AGREEMENT**

* I agree to repay this loan by 12 monthly deductions from my salary.
* I agree to provide the College with documentary evidence of my application within one month of receiving the loan – please e-mail a scanned copy to [payrollteam@rvc.ac.uk](mailto:payrollteam@rvc.ac.uk).
* In the event of my leaving College employment before the loan is fully repaid, I undertake to repay the balance in full or have it deducted from my final salary or other payments due from the RVC, including expenses. Failure to repay monies owed will result in interest being charged at commercial rates on the debt outstanding and will be recoverable through the courts for non-payment.
* In the event of an unsuccessful application the loan becomes immediately repayable.

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Signature** |  | **Date** |  |

Please foreword this form to your Head of Department to approve

**Office Use Only:**

|  |
| --- |
| Cost code(s) to be charged as entered by HoD. |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** |  | **%** | **RVP** |  |  |  |
| **2** |  | **%** | **RVP** |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Head of Department Authorisation |  | | | Date |  |
| Approval HR Director or  Nominee Approval |  | | | Date |  |
| Date Passed to Finance to Raise Loan Payment: |  | Comments |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Date Payroll Actioned + Initials: |  | Date Payroll Checked + Initials |  |