

COVID-19 – LOAN EXTENSION REQUEST

NAME	
DATE	
EMPLOYER	
Job Description	
Home Phone	
Email Address	

*please print

Due to the impact of the Corvid-19 Pandemic, I/we are requesting a loan extension for the following reason(s). Please check...

_____ Have been laid-off due to closure or severe reduction of services in my department.

_____ Have had my hours reduced due to decline of service needs in my department.

_____ My spouse/partner has been laid off or hours severely reduced due to COVID-19. Name of Spouse/partner and place of employment: _____

_____ Unable to work due to child care issues resulting from school, daycare closures or Family Leave.

_____ Have been requested to remain at home due to my health concerns.

_____ Other, please explain

Signature: _____ Date: _____

Please complete and either fax, scan & email, in-house routing or mail. We will try to get a response to you within 2 business days of receiving. If approved, we will set up a time for completion of loan documents to be signed.

Extension granted in April, 1st payment due would be July 25, 2020; granted in May, 1st payment would be August 25, 2020.

If you have any questions, please call or email us.

St. Pat's Employees Federal Credit Union

500 West Broadway * Broadway Bldg.. Level One * Missoula MT 59802

Tele: 406-329-5665 Fax: 406-329-2639 Email: Credit.Union@providence.org

Monday – Fridays 7:30am to 5:00pm