



Religious Eligibility Worksheet
For all 7(a) and 504 Loan Programs

OMB Control No.: 3245-0348
Expiration Date: XX/XX/XXXX

The purpose of the information requested is to assist the SBA and the Lender/Certified Development Company (CDC) with determining the eligibility of a loan request from a Small Business Applicant whose business has a religious component.

Applicant Business Legal Name _____ DBA _____

- Type of Loan Requested: 7(a) loan, SBA Express, Export Express, 504 loan, International Trade, CAPLine, Export Working Capital Program

Requested Loan Amount \$ _____

Please detail the use of proceeds below (attach a separate sheet if necessary).

[Empty box for detailing use of proceeds]

Is the Small Business Applicant and/or its activities connected, associated, or affiliated with a religious organization in any way? Yes No

If "Yes" explain the nature and extent of the relationship (attach a separate sheet if necessary).

[Empty box for explaining relationship]

Nature of the Religious Component (Please check all that apply)

- Checkboxes for: Sale of religious books, music, artifacts, gifts, and/or other religious items; Religious instruction, counseling, or indoctrination; Religious broadcasting; Generation of newspaper, journal, or other religious publications; Creation or development of religious materials; Sale or distribution of religious publications; Prayer, mediation, religious worship, religious service or proceeding; Provision of reading room or other space to conduct lectures, readings, prayer, worship, meditation, or other activities related to religion; Other:

Comments or Explanation of the Above (attach separate sheet if necessary)

[Empty box for comments or explanation]

Describe the quantity or extent of the religious component or activities with regard to the entire business. In this regard, examine both the actual religious activities (particularly those that involve teaching, instructing, counseling, or indoctrinating) and whether the religious component pervades or permeates the entire business. (attach separate sheet if necessary)

[Empty box for describing quantity or extent of religious component]

Lender/CDC Official: _____
Signature

Date: _____

Print Name and Title: _____

Determination Eligible Recommend Not Eligible

Comment or Explanation:

SBA Center/District Counsel: _____
Signature

Date: _____

Type or Print Name: _____

NOTE: According to the Paperwork Reduction Act, you are not required to respond to this collection of information unless it displays a currently valid OMB Control Number. The estimated burden for completing this form, including time for reviewing instructions, gathering data needed, and completing and reviewing the form is 15 minutes per response. Comments or questions on the burden estimates should be sent to U.S. Small Business Administration, Director, Records Management Division, 409 3rd St., SW, Washington DC 20416, and/or SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Rm. 10202, Washington DC 20503. **PLEASE DO NOT SEND FORMS TO THESE ADDRESSES.**