

 *The Sinsinawa Dominicans*  
Office of Peace and Justice  
585 County Road Z  
Sinsinawa, WI 53824-9701

Thank you for your interest in applying for a loan from the Sinsinawa Dominicans. Please complete the application form and return it to the address stated on the application.

Our policy regarding loans is that on the initial request we do not invest more than \$30,000 for 3 years at 3% interest. These figures can be renegotiated after the 3 years.

The process for approval of a loan begins with our Alternative Investment Advisory Committee's (AIAC) review of your application. AIAC meets two times a year in the fall and spring. If the committee approves your request, a formal recommendation is made to our Leadership Council, who then makes the final decision.

Due to the number of people involved in the process, please include 20 copies of everything that you are submitting.

If you have any questions, please contact: Sister Bernita Hessling, OP  
Interim Promoter of Peace and Justice  
(608) 748-4411  
*opjustice@aol.com*



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585 County Road Z  
Sinsinawa, Wisconsin 53824-9701

**Sinsinawa Dominican Alternative Investment Fund**

**Application Form for a Direct Loan for a Specific Project**

Name of Organization: \_\_\_\_\_

Federal Identification Number \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Organization Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

What is your connection/relationship with/to the Sinsinawa Dominicans? \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

A. Legal Structure: (Check One)

Sole Proprietor \_\_\_\_ For-Profit Corporation \_\_\_\_ Cooperative \_\_\_\_

Partnership \_\_\_\_ Non-Profit Corporation \_\_\_\_ Other (specify) \_\_\_\_

(Please include a copy of your 501c(3))

President or Board Chairperson \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

B. Please attach a detailed description of your organization including:

1. The philosophy and goals of the organization
2. Description of its programs and activities
3. Evidence of the success of its activities
4. Description of the staff, the internal organization
5. Names and backgrounds of the Board of Directors

Please include copies of the Articles of Incorporation and By-Laws

C. If your organization is part of another, please attach a description of that organization and the relationship with your group, including the same information asked above of your organization.

D. Please include a detailed description of the purpose of the loan, including:

1. How is the purpose of the loan consistent with the social impact goals of the Sinsinawa Dominican Alternative Investment Fund?

Social Impact Goals:

- a. To particularly empower women and people of color to create, manage and own enterprises.
- b. To create alternative approaches (i.e. worker cooperatives) for the production of goods and services and to provide for worker participation in decision making.
- c. To protect the environment and to encourage the development of alternative energy sources, particularly in the area of agricultures.
- d. To benefit the involuntarily poor and/or oppressed.
- e. To enhance human life in areas of health, education, housing, food, leisure and transportation.

2. How will the loan promote the philosophy and goals of your organization?

3. How many people will benefit from the loan?

4. Who benefits from the loan? (e.g. ages, race, sex, income levels, etc.)

E. Has your organization sought a loan for this purpose from any other sources than the Sinsinawa Dominican Alternative Investment Fund? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, then indicate source(s), outcome and date. If refused, please explain the reasons.

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_

F. Has your organization any other indebtedness? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, to whom? How much? Under what terms of repayment?

G. What collateral will your organization provide to secure this loan? Describe.

If you are unable to provide collateral, explain the reasons:

H. Describe your proposed payment schedule.

Amount needed (give minimum and maximum) \_\_\_\_\_

Terms: Interest rate \_\_\_\_\_ Number or Years \_\_\_\_\_

I. At this time, what problems do you anticipate for the project? How do you intend to handle them?

J. To complete this application, please attach:

1. Your most current audit financials and balance sheets for the last three years.
2. Your projected budget and cash flow for the current year and cash flow projections for the period of the loan.
3. Resumes and job descriptions for those responsible for the project.
4. Names and addresses of at least two individuals who can tell us about your organizations and/or of the project you have sponsored or developed.

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Signature of person completing this form

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Title

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Date

**Applicant Checklist**

(PLEASE include)

- Copy of the 501(c) 3
- Detailed Descriptions (See B. Page 1)
- Copies of Articles of Incorporation and By-Laws
- Detailed Descriptions (See D. Page 2)
- Audited Financials (+ 3 years of financials)
- Projected Budget and Cash Flow Statements
- Resumes of project leaders and job descriptions
- References

Please return completed application to:

Bernita Hessling, OP  
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Sinsinawa, WI 53824  
Phone: 608-748-4411  
Email: [opjustice@aol.com](mailto:opjustice@aol.com)