Republic of the Philippines

Department of Education

REGION IV- A CALABARZON

CITY SCHOOLS DIVISION OF THE CITY OF TAYABAS

Advisory No. 138, s. 2026
June 22, 2026
In compliance with DepEd Order (DO) No. 8, s. 2013
This advisory is issued not for endorsement per DO 28, s. 2001
but only for the information of Deped Officials,
personnel/staff, as well as the concerned public.
(Visit *www.deped.gov.ph*)

PAG-IBIG SAFE LOAN PROGRAM

The Pag-IBIG Fund announces the Pag-IBIG SAFE Loan. This program allows qualified members to borrow up to PHP 10,000.00. Loan Applications may be submitted until September 8, 2026.

Enclosed is the copy of the Pag-IBIG Safe Loan Program for your reference.

Wide dissemination of this advisory is hereby requested.

OSDS- pag-ibig safe loan program
PER9NCKL-002773/June 22, 2026

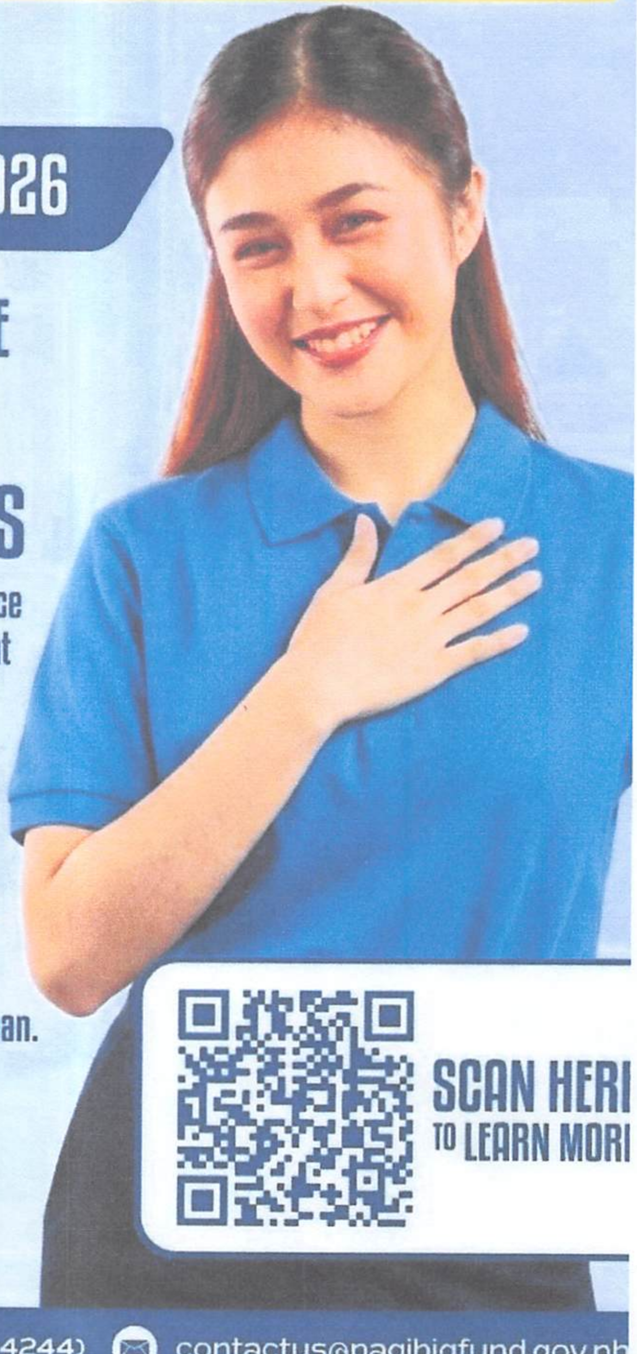
Address: Brgy. Potol, Tayabas City
Telephone No.: (042) 785-9615
Email Address: tayabas.city@deped.gov.ph
Website: https://www.sdotayabascity.ph

SAFE LOAN

SPECIAL **A**SSISTANCE FOR **F**INANCIAL **E**MERGENCIES

SUPORTANG MAAASAHAN SA ORAS NG PANGANGAILANGAN

APPLY UNTIL SEPTEMBER 8, 2026



- **CASH LOAN ASSISTANCE** na hanggang **₱10,000**
- **MABABANG INTERES**
  Mas ligtas at abot-kayang loan assistance upang makaiwas sa mataas na interes at mabigat na bayarin.
- **3-BUWANG GRACE PERIOD**
  Magsimulang magbayad sa ikaapat na buwan matapos ma-release ang iyong loan.

SCAN HERE TO LEARN MORE

LINGKOD Pag-IBIG

BAGONG PILIPINAS

pagibigfund.gov.ph | 8Pag-IBIG (8724-4244) | contactus@pagibigfund.gov.ph

SAFE
SPECIAL ASSISTANCE FOR FINANCIAL EMERGENCIES
LOAN

HOW TO APPLY FOR Pag-IBIG SAFE LOAN via VIRTUAL Pag-IBIG

IDENTITY VERIFICATION

1. I-verify ang iyong identity gamit ang iyong **Pag-IBIG MID Number.**

LOAN APPLICATION DETAILS

2. Ibigay ang **loan details** at ang iyong **contact information.**

OTP VERIFICATION

3. Ilagay ang **One-Time PIN (OTP)** na ipinadala sa iyong registered mobile number.

Pag-IBIG LOYALTY CARD PLUS / DISBURSEMENT CARD

4. Ibigay ang **card details** kung saan ide-deposit ang loan proceeds.

SUPPORTING DOCUMENTS

5. I-upload ang mga **required documents** para makumpleto ang iyong loan application.

LINGKOD Pag-IBIG

BAGONG PILIPINAS

EXPANDED 4PH PAMBANSANG PABAHAY PARA SA PILIPINO PROGRAM

APPLY NOW
OPEN UNTIL 08 SEP 2026

pagibigfund.gov.ph | 8Pag-IBIG (8724-4244) | contactus@pagibigfund.gov.ph

"Aly"
ALYSSA L. DEDORO
Sales and Customer Support Assistant
Marketing and Sales Division
Pag-IBIG Fund Lucena
(02) 8422 3000 local 6507

APPLICATION FORM FOR SPECIAL ASSISTANCE FOR FINANCIAL EMERGENCIES (SAFE)

HQP-SLF-171
(V01, 06/2026)

INSTRUCTIONS:
1. Accomplish this form in one (1) copy only. Print this form back to back on one single sheet of paper.
2. Type or print all entries in BLOCK or CAPITAL LETTERS.
3. All data fields are mandatory. Otherwise, put N/A if not applicable.

Pag-IBIG MID NO.	APPLICATION NO.
DATE OF BIRTH	PLACE OF BIRTH
CITIZENSHIP	EMAIL ADDRESS
CELLPHONE NUMBER	HOME TELEPHONE NUMBER
APPLICANT'S TAXPAYER IDENTIFICATION NUMBER (TIN)	SSS/GSIS NO.
BUSINESS TELEPHONE NUMBER	NATURE OF WORK
LOAN TERM ☐ One (1) Year ☐ Two (2) Years ☐ Three (3) Years	
DESIRED LOAN AMOUNT ☐ Maximum Loan Amount ☐ Others, specify: ______	
NET TAKE HOME PAY (NTHP)	
SOURCE OF FUND	

LAST NAME	FIRST NAME	NAME EXTENSION (e.g., Jr., II)	MIDDLE NAME	MAIDEN MIDDLE NAME (for married women)	NO MIDDLE NAME (check if applicable only) ☐

COMPLETE MOTHER'S MAIDEN NAME	NATIONALITY	SEX	MARITAL STATUS
		☐ Male ☐ Female	☐ Single ☐ Legally Separated ☐ Divorce ☐ Married ☐ Annulled/Nullified ☐ Widowed

PERMANENT HOME ADDRESS *Unit/ Room No., Floor Building Name Lot No., Block No., Phase No. House No.*

Street Name Subdivision Barangay Municipality/City Province/State/Country (if abroad) ZIP Code

PRESENT HOME ADDRESS *Unit/Room No., Floor Building Name Lot No., Block No., Phase No. House No.*

Street Name Subdivision Barangay Municipality/City Province/State/Country (if abroad) ZIP Code

EMPLOYER/BUSINESS NAME

EMPLOYER/BUSINESS ADDRESS *Unit/Room No., Floor Building Name Lot No., Block No., Phase No. House No. Street Name*

Subdivision Barangay Municipality/City Province/State/Country (if abroad) ZIP Code

EMPLOYEE ID NUMBER	DATE OF EMPLOYMENT

PREVIOUS EMPLOYMENT DETAILS FROM DATE OF Pag-IBIG MEMBERSHIP *(Use another sheet if necessary)*

EMPLOYER/BUSINESS NAME	EMPLOYER/BUSINESS ADDRESS	FROM *(mm/yy)*	TO *(mm/yy)*

In the event of the approval of my application for SAFE Loan, I hereby authorize Pag-IBIG Fund to credit my loan proceeds through my Payroll Account/Disbursement Card that I have indicated on the right portion.

SIGNATURE OF APPLICANT

PAYROLL ACCOUNT/DISBURSEMENT CARD

NAME OF BANK/BRANCH

APPLICATION AGREEMENT

In consideration of the loan that may be granted by virtue of this application subject to the pertinent provisions of the Implementing Rules and Regulations of Pag-IBIG Fund, I hereby waive my rights under R.A. No. 1405 (Secrecy of Bank Deposits Act) and authorize Pag-IBIG Fund to verify/validate my payroll account/disbursement card. Furthermore, I hereby authorize my present employer, ______________________ or any employer with whom I may get employed in the future, to deduct the membership savings (MS) and monthly amortization due from my salary and remit the same to Pag-IBIG Fund. If the resulting monthly net take home pay after deducting the computed monthly amortization on SAFE loan falls below the monthly net take home pay as required under the GAA/company policy, I authorize Pag-IBIG Fund to compute for a lower loanable amount.

I understand that should I fail to pay the monthly amortization due, I shall be charged with a penalty of 1/20 of 1% of any unpaid amount for every day of delay.

If for any reason excess loan proceeds are erroneously credited to my payroll account/disbursement card, I hereby authorize Pag-IBIG Fund to debit/deduct the excess amount from my account without need of further notice of demand. Should my account balance be insufficient, the Fund has the right to demand for the excess amount to be refunded.

I authorize Pag-IBIG Fund to disclose, submit, share or exchange any of my account information to legal and government regulating agencies, other banks, partner-merchants or third parties in accordance with R.A. No. 9510 (Credit Information System Act), R.A. No. 10173 (Data Privacy Act of 2012), and other related or pertinent laws and regulations, as described in Pag-IBIG Fund's Freedom of Information (FOI) Manual. The credit information may also be transferred to service providers (e.g., Credit Information Corporation, Bankers Association of the Philippines - Credit Bureau), likewise in accordance with laws and regulations.

I have read, understood and agree to be bound by the terms and conditions governing the eDisbursement Facility/Program and Pag-IBIG Fund's partner-banks' internal guidelines.

Furthermore, I agree to participate in all current and future promotional activities conducted by the Fund.

I certify that the information given and any or all statements made herein are true and correct to the best of my knowledge and belief. I hereby certify under pain of perjury that my signature appearing herein is genuine and authentic.

Signature of Applicant Over Printed Name

PROMISSORY NOTE

For value received, I promise to pay on due date without need of demand to the order of Pag-IBIG Fund with principal office at BDO Life Megaplaza, 358, Sen. Gil Puyat Avenue., City of Makati the sum of Pesos:

(P______________) Philippine Currency, with an interest rate of 5.95% per annum, with interest during the grace period and shall be amortized over the term of the loan. Any amendment to the interest rate shall be set by the Interest Rate Setting Committee pursuant to the Fund's Full Risk-Based Pricing Framework.

I hereby waive notice of demand for payment and agree that any legal action, which may arise in relation to this note, may be instituted in the proper court of Makati City.

Finally, this note shall likewise be subject to the following terms and conditions:

1. I shall pay the amount of Pesos: ______________________ (P______________) through salary deduction, whenever feasible, over a period of one (1) year/two (2) years or three (3) years, with a grace period of three (3) months. In case I am unable to pay through salary deductions for any of the following circumstances, such as but not limited to, suspension from work; leave of absence without pay; insufficiency of take home pay at any time during the term of the loan; or other circumstances analogous to the foregoing, payments should be made directly to the Pag-IBIG Fund office where the loan was released.
2. Payments are due on or before the 15th day of the month starting on ______________
3. Payments shall be applied according to the following order of priorities: Penalties, Interest and Principal.
4. A penalty of 1/20 of 1% of any unpaid amount shall be charged to me for every day of delay.
5. I shall be considered in default in any of the following cases:
   a. Any willful misrepresentation made in any of the documents executed in relation hereto;
   b. Failure to pay any three (3) consecutive monthly amortizations;
   c. Failure to pay any three (3) consecutive monthly membership savings;
   d. Violation of any of the membership/STL/housing loan policies, rules, regulations and guidelines of the Pag-IBIG Fund.
6. In the event of default, the outstanding loan obligation shall become due and demandable. Without demand, the Fund shall offset the outstanding loan obligation from my Total Accumulated Value (TAV). However, immediate offsetting of my outstanding SAFE loan obligation may be effected upon approval of my request, provided such request is based on the following justifiable reasons: Total disability or insanity; Separation from service by reason of health; Death of member's immediate family member; Distressed member due to unemployment limited to layoff and/or closure of company; Critical illness of the member or any of his/her immediate family member, as certified by a licensed physician under one of the following categories, subject to the approval of the Fund: cancer, organ failure, heart-related illness, stroke, neuromuscular-related illness; Repatriation of OFW member from host country and other meritorious grounds as may be approved for by the Board, by reason thereof, resulted in his failure to pay the required amortization when due.
7. In the event of membership termination prior to loan maturity, any outstanding loan balance shall be deducted from my TAV and/or any amount due to my beneficiaries in the possession of the Fund. In case of my death, the outstanding obligation shall be computed up to the date of death. Any payment received after date of death shall be refunded to my beneficiaries.
8. In case of falsification, misrepresentation or any similar acts committed by me, Pag-IBIG Fund shall automatically suspend my loan privileges indefinitely. I shall abide with all the applicable rules and regulations governing this lending program that Pag-IBIG Fund may promulgate from time to time.

Signed in the presence of:

Witness *(Signature over Printed Name)*	Witness *(Signature over Printed Name)*	Signature of Applicant over Printed Name

*OTHER INFORMATION

How did you learn about the Pag-IBIG SAFE Loan?

☐ Pag-IBIG Fund Website ☐ Radio ☐ Streaming Service Ad ☐ Billboard ☐ Referral ☐ Others: ______
☐ Social media ☐ Television ☐ Newspaper/Online Newspaper ☐ Word of Mouth ☐ Employer/Fund Coordinator

AUTHORITY TO DEDUCT (Optional)

In case of retirement/separation from employment, I hereby authorize my employer to deduct any outstanding SAFE Loan balance from my retirement or separation benefits to fully settle my loan obligation. In the event that my retirement/separation benefits are not sufficient to settle the outstanding balance of my SAFE Loan or my employer fails for whatever reason, to deduct the same from said retirement/separation benefits, I hereby authorize Pag-IBIG Fund to apply whatever benefits are due to me from the Fund to settle the said obligation.

SIGNATURE OF APPLICANT

THIS PORTION IS FOR Pag-IBIG FUND USE ONLY

RECEIVED BY:		APPROVED/DISAPPROVED BY:	
(SIGNATURE OVER PRINTED NAME) ***(POSITION/DESIGNATION)***	***DATE***	***(SIGNATURE OVER PRINTED NAME)*** ***(POSITION/DESIGNATION)***	***DATE***

GUIDELINES AND INSTRUCTIONS

A. Checklist of Requirements

1. Application Form for Special Assistance for Financial Emergencies (SAFE, HQP-SLF-171) (1 Original)
2. Valid ID acceptable to the Fund (1 Photocopy)

Notes:

a. If the submission is made through an authorized representative, submit the application form, authorization letter, and valid IDs of the member and the authorized representative (1 Photocopy).

b. In all instances, wherein photocopies are submitted, the original documents must be presented for authentication.

B. Who May File

Any Pag-IBIG Fund member who satisfies the following requirements:

1. Has made at least twelve (12) monthly membership savings (MS);
   - A member who has withdrawn his MS due to membership maturity, or who has optionally withdrawn his MS, shall be allowed to apply for a SAFE loan provided that said member has subsequently accumulated 12 MS or at least its equivalent from the cut-off date of membership maturity or optional withdrawal.
   - A member who does not meet the required 12 MS may nevertheless, be allowed to avail of a SAFE loan, provided that the total accumulated savings is at least equivalent to 12 MS, based on the rate applicable to the member.
2. Must be an active Pag-IBIG member at the time of loan application;
3. If with existing short-term loan, the account/s must not be in default as of date of application;
4. Has sufficient proof of income.

C. How to File

The applicant shall:

1. Secure the Application Form for the Special Assistance for Financial Emergencies (SAFE) from any Pag-IBIG Fund Branch or download from Pag-IBIG website at www.pagibigfund.gov.ph.
2. Accomplish one (1) copy of the application form.
3. Submit the accomplished application form, together with the required documents to any Pag-IBIG Fund Branch. Processing of loans shall commence only upon submission of the complete documents.

D. Loan Features

1. **Loan Amount**

   A qualified Pag-IBIG member shall be allowed to borrow an amount up to Ten Thousand Pesos (P10,000.00), which shall be based on the lowest of the following:

   1.1 Desired Loan Amount
   Based on the actual need of the member-borrower.

   1.2 Loan Entitlement
   The loan entitlement shall be equivalent to ninety percent (90%) of TAV. However, if the borrower has an existing MPL/Calamity Loan/Health and Education Loan Programs (HELPs), the loanable amount shall be the difference between the 90% of the borrower's TAV and the outstanding balance of his MPL/Calamity Loan/HELPs.

   1.3 Capacity to Pay
   The loanable amount shall be limited to an amount which will not render the borrower's Net Take Home Pay (NTHP) to fall below the minimum requirement as prescribed by the General Appropriation Act (GAA) or company policy, whichever is applicable.

   Any excess loanable amount from the borrower's TAV may be utilized through the availment of other Short-Term Loan (STL) program, subject to terms and conditions in the prevailing guidelines.

2. **Interest Rate**

   The loan shall be charged with an interest rate of 5.95% per annum, with interest during the grace period and shall be amortized over the term of the loan. Any amendment to the interest rate shall be set by the Interest Rate Setting Committee pursuant to the Fund's Full Risk-Based Pricing Framework.

3. **Loan Term**

   The loan shall be repaid over a period of one (1) year, two (2) years or three (3) years at the option of the member upon loan application, with a grace period of three (3) months.

   However, in the event that the borrower does not indicate the chosen loan term, upon loan application, the default term shall be two (2) years.

4. **Loan Release**

   The loan proceeds shall be released through any of the following modes:
   a) Crediting to the borrower's disbursement card or Loyalty Card Plus;
   b) Crediting to the borrower's bank account through LANDBANK's Payroll Credit Systems Validation (PACSVAL);
   c) Other acceptable modes of disbursement.

5. **Loan Payments**

   5.1 The loan shall be repaid in equal monthly payments in such amounts as may fully cover the principal and interest over the loan period. Said amortization shall be made, whenever feasible, through salary deduction.
   5.2 For self-employed individuals, Overseas Filipino Workers (OFWs) or other types of individual payors, monthly payments shall be paid through any other modes of payment approved by the Fund.
   5.3 Payments shall be remitted to the Fund on or before the fifteenth (15^{th}) day of each month starting on the fourth (4^{th}) month following the date indicated in the Disbursement Voucher.
   5.4 If the due date falls on a non-working day, the monthly amortization shall be paid on the first working day after the due date.
   5.5 The borrower may fully pay the outstanding balance of the loan prior to loan maturity.
   5.6 The borrower shall pay directly to the Fund in case the borrower is unable to pay through salary deduction for any of the following circumstances, such as but not limited to:
   a. Suspension from work;
   b. Leave of absence without pay;
   c. Insufficiency of take home pay at any time during the term of the loan; or
   d. Other circumstances analogous to the foregoing.
   5.7 Payments shall be applied according to the following order of priorities:
   a. Penalties; if any
   b. Interest; and
   c. Principal
   5.8 Any amount in excess of the required monthly amortization shall be applied to succeeding amortizations which will be posted on the next due date.

6. **Penalties**

   A penalty of 1/20 of 1% of any unpaid amount shall be charged to the borrower for every day of delay. For borrowers paying through salary deduction, penalties shall only be reversed upon presentation of proof that non-payment was due to the fault of the employer. In such case, penalties due from the borrower shall be charged to the employer. Non-remittance of the total amortization shall likewise subject the employer with a penalty of 1/10 of 1% per day of delay of the amounts payable from the date the loan amortization or payments fall due until paid.

7. **Default**

   The borrower shall be in default in any of the following cases, without need for demand:
   a. Any willful misrepresentation made by the borrower in any of the documents executed in relation hereto;
   b. Failure of the borrower to pay any three (3) consecutive monthly amortizations;
   c. Failure of the borrower to pay any three (3) consecutive Pag-IBIG monthly savings; or
   d. Violation by the borrower of any of the membership/STL/housing loan policies, rules, regulations and guidelines of Pag-IBIG Fund.

8. **Effects of Default**

   In the event of default, the outstanding loan obligation shall become due and demandable. Without demand, the Fund shall offset the outstanding loan obligation from the borrower's TAV.

E. Availment Period

The Pag-IBIG member must avail himself of the Pag-IBIG SAFE Loan within a period of ninety (90) days from the effectivity of the guidelines.

F. Other Loan Provisions

1. The SAFE Loan/MPL/HELPs and/or Calamity Loan shall be treated as separate and distinct from one another. Accordingly, a member may avail of SAFE Loan even with an existing MPL/HELPs/CL, and vice versa. Loan applications under these programs shall be governed by their respective guidelines.
2. In no case shall the aggregate STL exceed 90% of the borrower's TAV.
3. An eligible member who is an active member under more than one employer shall have only one outstanding SAFE Loan at any given time. At the point of application, the member shall choose which employer shall deduct and remit his/her monthly amortizations.
4. In the event of membership termination prior to loan maturity, the outstanding balance shall be deducted from the borrower's TAV, and/or any amount due him or his beneficiaries in the possession of the Fund. In case of borrower's death, the outstanding balance shall be computed up to the date of death. Any payments received after date of death shall be refunded to the borrower's beneficiaries.
5. Borrower may request for the immediate offsetting of his/her outstanding SAFE loan balance against the borrower's TAV. It shall be effected upon approval of the borrower's request; provided, such request is based on any of the following justifiable reasons: Total disability or insanity; Separation from service by reason of health; Death of member's immediate family member; Distressed member due to unemployment limited to layoff and/or closure of company; critical illness of the member or any of his/her immediate family member, as certified by a licensed physician under any of the following categories, subject to the approval of the Fund: cancer, organ failure, heart-related illness, stroke, neuromuscular-related illness; Repatriation of OFW member from host country and other meritorious grounds as may be approved for by the Board.
6. In case there is a need to update the borrower's address and/or contact details (i.e. permanent home address, present home address, email address, cell phone number, home telephone number and business telephone number) at the point of SAFE loan application, the borrower shall not be required to submit Member's Change of Information Form (MCIF, HQP-PFF-049). The updating of information shall be based on the submitted SAFE application form.

   However, in case the information that needs to be changed/updated is other than the address and/or contact details, the concerned borrower is required to submit the accomplished MCIF together with the supporting documents, if necessary. Please refer to the Checklist of Requirements specified at the back portion of the MCIF.