

Application

1 NOTE AND COMPLETE

Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual Credit or Joint Credit.
 Individual Credit: Complete **Applicant** section. Complete **Co-Applicant, Spouse, Guarantor** (referred to as "Other") section: (1) about your spouse if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or (2) if your spouse will use the Account, or (3) if there is a guarantor on this account. Please check box to indicate whom the information is about.
 Joint Credit: Provide information about both of you by completing **Applicant** and **Other** section.

Amount Requested \$ _____ **Purpose:** _____

Collateral:

Repayment: Payroll Deduction Cash Automatic Payment Military Allotment _____

STATEMENT OF INTENT

Check if desired.

- Credit Disability Insurance
 Single Credit Life Insurance
 Joint Credit Life Insurance

Check coverage(s) desired. The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the terms and conditions must be signed for coverage to become effective.

2 APPLICANT INFORMATION

APPLICANT

Please print in ink or type.

NAME (Last - First - Initial) _____

DRIVER'S LICENSE NUMBER/STATE _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

BIRTH DATE _____ HOME PHONE _____ BUSINESS PHONE / EXT. _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT

YEARS
AT THIS
ADDRESS

PREVIOUS ADDRESS (Street - City - State - Zip) _____ OWN RENT

YEARS
AT THIS
ADDRESS

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:

MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

LIST AGES OF DEPENDENTS NOT LISTED BY OTHER APPLICANT

(Exclude Self)

CO-APPLICANT **SPOUSE** **GUARANTOR**

Use "SAA" if information is "Same As Applicant".

NAME (Last - First - Initial) _____

DRIVER'S LICENSE NUMBER/STATE _____

ACCOUNT NUMBER _____ SOCIAL SECURITY NUMBER _____

BIRTH DATE _____ HOME PHONE _____ BUSINESS PHONE / EXT. _____

PRESENT ADDRESS (Street - City - State - Zip) _____ OWN RENT

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COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:

MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

LIST AGES OF DEPENDENTS NOT LISTED BY APPLICANT

(Exclude Self)

3 EMPLOYMENT INFORMATION

NAME AND ADDRESS OF EMPLOYER _____

YOUR TITLE / GRADE _____ SUPERVISOR'S NAME _____

START DATE _____ HOURS AT WORK _____ IF SELF EMPLOYED, TYPE OF BUSINESS _____

IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS _____

STARTING DATE _____

ENDING DATE _____

MILITARY

IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR YES NO WHERE _____ ENDING / SEPARATION DATE _____

NAME AND ADDRESS OF EMPLOYER _____

YOUR TITLE / GRADE _____ SUPERVISOR'S NAME _____

START DATE _____ HOURS AT WORK _____ IF SELF EMPLOYED, TYPE OF BUSINESS _____

IF EMPLOYED IN CURRENT POSITION LESS THAN FIVE YEARS, COMPLETE PREVIOUS EMPLOYER NAME AND ADDRESS _____

STARTING DATE _____

ENDING DATE _____

IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR YES NO WHERE _____ ENDING / SEPARATION DATE _____

4 REFERENCES

Please include Street, City, State and Zip.

NAME AND ADDRESS OF CREDITOR(S) OF DEBTS PAID OFF _____ TELEPHONE _____

NAME AND ADDRESS OF NEAREST RELATIVE _____ RELATIONSHIP _____

NOT LIVING WITH YOU _____ HOME PHONE _____

NAME AND ADDRESS OF PERSONAL FRIEND _____ HOME PHONE _____

—NOT A RELATIVE _____

NAME AND ADDRESS OF CREDITOR(S) OF DEBTS PAID OFF _____ TELEPHONE _____

NAME AND ADDRESS OF NEAREST RELATIVE _____ RELATIONSHIP _____

NOT LIVING WITH YOU _____ HOME PHONE _____

NAME AND ADDRESS OF PERSONAL FRIEND _____ HOME PHONE _____

—NOT A RELATIVE _____