

College and University Credit Union

Your Union's Credit Union

208 West Kinzie Street
Chicago, IL 60610

Fax: 312-755-1030 Phone: 312-755-9400

LOAN APPLICATION FORM — complete both sides

1. APPLICANT INFORMATION

FIRST NAME		INITIAL	LAST NAME		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	TODAY'S DATE	
SOCIAL SECURITY	DRIVERS LICENSE NUMBER		DATE OF BIRTH	DO YOU <input type="checkbox"/> OWN <input type="checkbox"/> RENT	HOME PHONE NUMBER	NO. OF DEP.	AGES OF DEPENDENTS
CURRENT STREET ADDRESS			APT. NUMBER	CITY	STATE	ZIP CODE	SINCE (MOYR)
FORMER STREET ADDRESS			APT. NUMBER	CITY	STATE	ZIP CODE	YEARS THERE
NAME, ADDRESS, AND PHONE OF NEAREST RELATIVE NOT LIVING WITH YOU							
NAME, ADDRESS, AND PHONE OF PERSONAL REFERENCE							
THIS ACCOUNT WILL BE <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> JOINT WITH SPOUSE <input type="checkbox"/> CO-APPLICANT		complete for joint account, or if you live in a community property state <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (single, divorced, widowed)			NOTE: For spouse or co-applicant accounts, a <i>Spouse/Co-Applicant Information Form</i> must be attached to this application.		

2. EMPLOYMENT AND INCOME

UNION LOCAL	COLLEGE OR CAMPUS		DEPARTMENT		POSITION OR OCCUPATION	
WORK ADDRESS			SUPERVISOR'S NAME		WORK PHONE	EMPLOYMENT DATE
MONTHLY GROSS INCOME \$	MONTHLY INCOME AFTER TAXES \$	FOR FACULTY ONLY <input type="checkbox"/> TENURED <input type="checkbox"/> NON-TENURED	FOR NON-FACULTY <input type="checkbox"/> NON-PROBATIONARY <input type="checkbox"/> PROBATIONARY			
NAME AND LOCATION OF FORMER EMPLOYER					NUMBER OF YEARS THERE	
TYPE OF OTHER INCOME (IF ANY)					MONTHLY AMOUNT	
NAME AND ADDRESS OF PAYER						

3. ASSETS AND DEPOSITS

TYPE	BANK (OR OTHER) NAME AND ADDRESS	ACCOUNT NUMBER	APPROX. BALANCE
CHECKING			\$
SAVINGS			\$
OTHER			\$
DESCRIPTION OF CLEAR TITLE ASSETS		VALUE	PLEGGED AS COLLATERAL
CAR 1			<input type="checkbox"/> YES <input type="checkbox"/> NO
CAR 2			<input type="checkbox"/> YES <input type="checkbox"/> NO
PROPERTY			<input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER ASSETS			<input type="checkbox"/> YES <input type="checkbox"/> NO

4. PURPOSE OF LOAN

AMOUNT OF LOAN FOR WHICH
YOU ARE APPLYING:

REASON OR PURPOSE FOR THIS LOAN:

OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

please proceed to the back side

5. CREDIT INFORMATION

List ALL outstanding debts at the time of this application.

OBLIGATION	LENDER (OR OTHER) NAME AND ADDRESS	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENT	MONTHS PAST DUE
MORTGAGE OR RENT	VALUE OF HOME \$				
SECOND MORTGAGE	INTEREST RATE %				
AUTO MAKE YEAR					
CREDIT CARD					
CREDIT CARD					
OTHER LOANS					
Please answer each of the following questions. If "YES" explain in the box to the right of the date.		CHECK YES NO	DATE	TOTALS ⇨	
1. Have you ever filed a petition for bankruptcy?					
2. Have you ever filed a petition for Chapter 13 bankruptcy?					
3. Have you had any auto, furniture, or property repossessed?					
4. Are you a co-maker or co-signer on any loan?					
5. Have you ever had credit in any other name?					
6. Have you any suits pending, judgements filed, alimony or support awards against you?					

6. SIGNATURE

You agree that everything stated in this application is correct to the best of your knowledge. The Credit Union is authorized to investigate your credit worthiness, employment history, and to obtain a credit report and to answer questions about their credit experience with you. You understand that any false or misleading statements in your application may cause any loan or extension of credit to be in default.

APPLICANT SIGNATURE	DATE
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