

CREDIT UNION CENTER

WC# _____ A Division of Wichita CUSO, Inc. Date _____

Full Name: _____

SS#: _____ Date of Birth: _____

Government Issued Photo ID: _____ Expiration Date: _____

Current Address and Phone Numbers: _____

How long at this address? _____

Home Phone: _____ Cell Phone: _____

Previous Address: _____

How long at this address? _____

Employer or Government Agency Issuing Check: _____

Employer's Address: _____

Employer's Phone Number: _____

Length of time employed? _____

Average amount of payroll check: _____

Paid: Weekly _____ Bi-weekly _____ Monthly _____

Any special code or number needed for employment verification? _____

Financial Institution Check is Drawn On:

Name: _____

Address: _____

Account# _____ Routing# _____

List Two Personal References:

Name: _____

Address: _____

Phone: _____

Relationship: _____

Name: _____

Address: _____

Phone: _____

Relationship: _____

Current Financial Institution: _____

I certify that all of the information supplied by me in this application is true and correct and hereby authorize the Credit Union Center to obtain, without advance notice, any information which it deems necessary for approval or continuance of requested services, including credit reports, verification of employment, bank or other references.

Signature _____

Date _____

INTERNAL OFFICE USE ONLY

Information verified by: _____

OFAC/FinCen verification by: _____

Application approved by: _____

Discrepancy Resolution Comments: _____