



UNIVERSITY
FEDERAL CREDIT UNION

Memorial Union
2901 University Ave, Stop 8222
Grand Forks, ND 58202-8222

LOAN APPLICATION

ACCOUNT NUMBER

Married persons may apply for an individual account.

IMPORTANT: READ THIS SECTION CAREFULLY BEFORE CHECKING THE APPROPRIATE BOX(ES).

INDIVIDUAL CREDIT. Complete all "Borrower" sections. Complete information about your spouse ("Co-Maker" sections) if you live in a community property state (AZ, CA, ID, LA, NM, NV, TX, WA, WI), or if your spouse will use the Account, or information about the person making payments if you are relying on alimony, spousal support, child support or separate maintenance as a basis for repayment of the credit requested.

JOINT CREDIT. Complete all sections with information about you and your Other Applicant. Please check the Joint Credit box below to show your intent.

THIS ACCOUNT IS TO BE FOR: INDIVIDUAL CREDIT JOINT CREDIT We intend to apply for joint credit CO-MAKER/GUARANTOR OTHER

LOAN REQUEST

| | | |
|------------------|-----------------|------|
| REQUESTED AMOUNT | PURPOSE OF LOAN | DATE |
|------------------|-----------------|------|

PAYMENT PROTECTION: Single Life Joint Life Disability 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.

| Borrower | | | | BORROWER INFORMATION | | | | Co-Maker/Authorized User/Co-Borrower | | | | | | | |
|---|--|---|--|------------------------|--|------------------------------------|--|---|--|---|--|------------------------|--|---------------------------------|--|
| Borrower's Name (Last, First, Middle, include Sr./Jr. if applicable) | | | | | | | | Co-Borrower's Name (Last, First, Middle, include Sr./Jr. if applicable) | | | | | | | |
| Current Address (Street, City, State, Zip) <input type="checkbox"/> Other <input type="checkbox"/> Own <input type="checkbox"/> Rent Length _____ | | | | | | | | Current Address (Street, City, State, Zip) <input type="checkbox"/> Other <input type="checkbox"/> Own <input type="checkbox"/> Rent Length _____ | | | | | | | |
| Home Telephone Number | | Cellular Number | | Social Security Number | | Date of Birth | | Home Telephone Number | | Cellular Number | | Social Security Number | | Date of Birth | |
| ID No./State | | Complete for joint, secured credit or if you live in a community property state <input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED | | | | No. of Dependents (Excluding self) | | ID No./State | | Complete for joint, secured credit or if you live in a community property state <input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED | | | | No. of Depend. (Excluding self) | |
| Former Address (Street, City, State, Zip, Country) Length _____ | | | | | | | | Former Address (Street, City, State, Zip, Country) Length _____ | | | | | | | |

| Borrower | | | | EMPLOYMENT INFORMATION | | | | Co-Maker/Authorized User/Co-Borrower | | | | | | | |
|------------------------------------|--|-----------|--|------------------------|--|--|--|--------------------------------------|--|-----------|--|-----------------------|--|--|--|
| Employer | | | | | | | | Employer | | | | | | | |
| Address (Street, City, State, Zip) | | | | | | | | Address (Street, City, State, Zip) | | | | | | | |
| Position or Job Title | | | | Hours worked per Week | | | | Position or Job Title | | | | Hours worked per Week | | | |
| Telephone Number | | Hire Date | | Monthly Salary | | | | Telephone Number | | Hire Date | | Monthly Salary | | | |
| Former Employer | | | | | | | | Former Employer | | | | | | | |
| Address (Street, City, State, Zip) | | | | | | | | Address (Street, City, State, Zip) | | | | | | | |
| Telephone Number | | Hire Date | | Ending Date | | | | Telephone Number | | Hire Date | | Ending Date | | | |

| Borrower | | | | OTHER INCOME | | | | Co-Maker/Authorized User/Co-Borrower | | | | | | | |
|---|--|--|--|----------------|--|--|--|--|--|--|--|----------------|--|--|--|
| You need not list income from alimony, child support or separate maintenance unless you wish it considered for purposes of granting this credit. | | | | | | | | | | | | | | | |
| Type of Other Income | | | | Monthly Amount | | | | Type of Income | | | | Monthly Amount | | | |
| Type of Other Income | | | | Monthly Amount | | | | Type of Other Income | | | | Monthly Amount | | | |
| Is any income likely to be reduced before the credit requested is paid off? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | Is any income likely to be reduced before the credit requested is paid off? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | |

| Borrower | | | | REFERENCES | | | | Co-Maker/Authorized User/Co-Borrower | | | | | | | |
|---|--|--|--|------------------|--|--|--|---|--|--|--|------------------|--|--|--|
| Name of Nearest Relative not living with you | | | | Telephone Number | | | | Name of Nearest Relative not living with you | | | | Telephone Number | | | |
| Address of Reference (Street, City, State, Zip) | | | | Relationship | | | | Address of Reference (Street, City, State, Zip) | | | | Relationship | | | |
| Name of Reference | | | | Telephone Number | | | | Name of Reference | | | | Telephone Number | | | |
| Address of Reference (Street, City, State, Zip) | | | | | | | | Address of Reference (Street, City, State, Zip) | | | | | | | |

ASSETS AND LIABILITIES

PLEASE CHECK BOX A IF THE ASSET/CREDIT IS IN BORROWER'S NAME ONLY. PLEASE CHECK BOX B IF THE ASSET/CREDIT IS IN CO-BORROWER'S/OTHER PERSON'S NAME ONLY.

ASSETS:

| CHECK | | TYPE | ACCOUNT TYPE | DESCRIPTION (LIST ALL OTHER ASSETS INCLUDING AUTOS, REAL ESTATE, ETC.) | MARKET VALUE |
|--------------------------|--------------------------|------|--------------|--|--------------|
| A | B | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | |

BORROWER

CO-MAKER/AUTHORIZED USER/CO-BORROWER

DEPOSIT ACCOUNTS, INCLUDE CHECKING/SAVINGS AT BANK, CREDIT UNIONS AND SAVINGS AND LOAN ASSOCIATIONS.

| TYPE | COMPANY NAME/LOCATION | ACCOUNT NO. | APPROX. BALANCE | TYPE | COMPANY NAME/LOCATION | ACCOUNT NO. | APPROX. BALANCE |
|----------|-----------------------|-------------|-----------------|----------|-----------------------|-------------|-----------------|
| CHECKING | | | | CHECKING | | | |
| SAVINGS | | | | SAVINGS | | | |

LIABILITIES:

| Primary Borrower Account : | | | | Co-Borrower Account: | | | |
|--|--------------------------|------|---------------|----------------------|-------------|------------------|--------------|
| CHECK | | TYPE | COMPANY/PAYEE | CITY | ACCOUNT NO. | BALANCE | MO. PAYMENTS |
| A | B | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| BE SURE TO LIST ALL OPEN ACCOUNTS WITH OR WITHOUT A BALANCE. ATTACH A SEPARATE SHEET IF NECESSARY. | | | | | | TOTAL OBLIGATION | |

GENERAL QUESTIONS

| IF A "YES" ANSWER IS GIVEN, PLEASE EXPLAIN ON AN ATTACHED SHEET. | Borrower | | Co-Borrower | | IF A "YES" ANSWER IS GIVEN TO A QUESTION, PLEASE EXPLAIN ON AN ATTACHED SHEET. | Borrower | | Co-Borrower | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|
| | Yes | No | Yes | No | | Yes | No | Yes | No |
| Have you ever filed a petition for Chapter 13? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had any auto, furniture or other property repossessed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you filed for bankruptcy within the last 7 years? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any past due bills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Are there any suits pending, judgments unsatisfied, alimony or maintenance awards against you? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are you a US Citizen or permanent resident alien? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever applied for credit using another name? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are you a co-maker, endorser, or guarantor on any loan or note? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| List other names | | | | | If Yes, list name and amount. | | | | |

You promise that everything you have stated in this application is correct to the best of your knowledge and that the above information is a complete listing of what you owe. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. **An application fee of \$10.00 per applicant will be collected at the time of application.** You understand that the Credit Union will rely on the information in this application and your credit reports to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA. **PLEASE SUBMIT COPY OF CURRENT PAYCHECK STUB OR OTHER DOCUMENTATION FOR TOTAL INCOME.**

X _____ Date _____ X _____ Date _____
 Borrower's Signature Other Signature (if applicable)

OFFICE USE ONLY

| | | | | |
|-------------|-----------------------------------|--|--------------------|-------------------------|
| Date | <input type="checkbox"/> Approved | <input type="checkbox"/> Denied (Adverse Action Notice Sent) | Amount | Debt Ratio Before/After |
| LO Comments | | | Applicant Paid Fee | Co-Applicant Paid Fee |

X _____
 Loan Officer or Credit Committee Signature

X _____
 Loan Officer or Credit Committee Signature