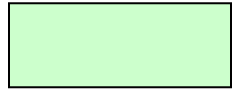




# U.W.I. CREDIT UNION CO-OPERATIVE SOCIETY LIMITED

## MEMBERSHIP APPLICATION FORM

TO BE COMPLETED IN BLOCK LETTERS



### Personal Details

\_\_\_\_\_ Maiden Name: \_\_\_\_\_  
FIRST NAME MIDDLE NAME SURNAME

of \_\_\_\_\_  
HOME ADDRESS

Date of Birth: MM/DD/YYYY Place of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Gender: Male [ ] Female [ ] Marital Status: Single [ ] Married [ ] Separated [ ] Divorced [ ] Widowed [ ]

Identification Nos.: National ID: \_\_\_\_\_ DP: \_\_\_\_\_ PP: \_\_\_\_\_

Telephone Nos.: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell 1: \_\_\_\_\_ Cell 2: \_\_\_\_\_

Email Address: \_\_\_\_\_ Number of years residing at address above: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Next of Kin: \_\_\_\_\_ NAME ADDRESS CONTACT NO.

### Application for Membership Status

UWI employee: [ ] UWICU Employee: [ ] UWI Student/Graduate: [ ] Tertiary Institution Employee/Student/Graduate: [ ]

Affiliated Institution Employee: [ ] Spouse/Parent/Sibling/Child/Grandchild/Ward of Member: [ ] Related A/C \_\_\_\_\_

Other: [ ] \_\_\_\_\_

### Employment Information

Employer's Name: \_\_\_\_\_ Tel. Nos.: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \$ \_\_\_\_\_ per Fortnight/ Month.

No. of mths/yrs at current employer: \_\_\_\_\_ Date of 1<sup>st</sup> appointment: MM/DD/YYYY Date of Termination: MM/DD/YYYY

Employment Status: Permanent: [ ] Tenure: [ ] Contract: [ ] Temporary: [ ]

Part-time: [ ] Casual: [ ] Self Employed: [ ]

Previous Employer: \_\_\_\_\_ No. of years employed: \_\_\_\_\_

### I confirm that my account will be serviced via:

[ ] Direct Salary Deductions [ ] Bank Standing Order [ ] Internal Standing Order

### Beneficiary Information

In the event of my death I hereby nominate \_\_\_\_\_  
FIRST NAME SURNAME RELATIONSHIP  
of \_\_\_\_\_  
BENEFICIARY ADDRESS to receive my benefits in the Society.

\_\_\_\_\_  
SIGNATURE OF APPLICANT/PARENT/LEGAL GUARDIAN

\_\_\_\_\_  
DATE MM/DD/YYYY

\_\_\_\_\_  
NAME OF RECOMMENDER (Member of CU)

\_\_\_\_\_  
SIGNATURE OF RECOMMENDER

\_\_\_\_\_  
NAME OF WITNESS #1

\_\_\_\_\_  
SIGNATURE OF WITNESS #1

\_\_\_\_\_  
NAME OF WITNESS #2

\_\_\_\_\_  
SIGNATURE OF WITNESS #2

**Important Notice**

**2/MA**

Please be advised that a “Politically Exposed Person” (PEP) refers to someone who has been entrusted with a prominent public function, or a relative or known associate of that person. Since a “PEP” generally presents a higher risk for potential involvement in bribery and corruption by virtue of their position and the influence that they may hold, it is mandatory that the following declaration be completed and signed accordingly.

**APPLICANT’S DECLARATION**

Has any member of your immediate family (spouse, parent, sibling, children, and children of spouse) or close affiliate, now or have you ever been a holder of public or political office in any country (local or foreign) such as, a current or former:

- a) **A Head of State, Senior Politician, Senior Government, Judicial or Military Official, Senior Executive of a state owned company or Important Political Party Official?**
- b) **A senior executive of an international organization?**

NO  YES  : If YES please indicate: Position held: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

I \_\_\_\_\_ declare that all statements made above are true and correct. I understand that any false statement may result in termination of my membership. I also agree to conform to the statutory provisions and Bye-Laws governing the operations of the UWI Credit Union Co-operative Society Limited.

\_\_\_\_\_  
SIGNATURE OF APPLICANT/PARENT/LEGAL GUARDIAN

Date: \_\_\_\_\_  
MM/DD/YYYY

**FOR INTERNAL USE ONLY**

**Original Supporting Documents submitted**

- ALL Identification declared under Personal Details (ALL Applicants)
- Recent Utility bill (all Adult Applicants)
- Marriage Certificate (for Spouse of Members)
- Birth Certificate (for all Children of Members)
- Student ID and recent Registration form/Degree Certificate (for all UWI Students/Graduates)
- Recent Job letter AND payslip (for all Employed persons)
- Work Permit/CSME certificate (for Non-Nationals only)
- Statement of Cash Flows with supporting documents (for all Self-Employed persons)

**Authorized Lists Checked**

- ISIL (Da’esh) & Al-Qaida Sanctions List UN2253 (formerly UN1267)
- Trinidad and Tobago Consolidated List of Court Orders (s. 22B (3) of ATA)
- Office of Foreign Assets Control (OFAC)

**Risk Rating**     Low         Medium         High

Verified by: \_\_\_\_\_

Date: \_\_\_\_\_  
MM/DD/YYYY

**FOR BOARD OF DIRECTORS ONLY**

1. Application **approved** by the Board of Directors of the UWI Credit Union Co-operative Society Limited at its meeting held on \_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
PRESIDENT

\_\_\_\_\_  
SECRETARY

2. Application **queried/denied** by the Board of Directors of the UWI Credit Union Co-operative Society Limited at its meeting held on \_\_\_\_\_  
MM/DD/YYYY

Reason/s: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
PRESIDENT

\_\_\_\_\_  
SECRETARY