



# MT. PLEASANT CREDIT UNION CO-OPERATIVE SOCIETY LTD MEMBERSHIP APPLICATION

**DATE:** \_\_\_\_\_

**BRANCH:** \_\_\_\_\_

**MEMBERSHIP #** \_\_\_\_\_

## SECTION A – PERSONAL DATA

**Name:**

**Date of birth:**

dd/mm/yyyy

\_\_\_\_\_

**Identification:**

ID#: \_\_\_\_\_

DP#: \_\_\_\_\_

PP#: \_\_\_\_\_

Other: \_\_\_\_\_

**Phone:**

Home #: \_\_\_\_\_

Cell#: \_\_\_\_\_

Email: \_\_\_\_\_

**Current address:**

**Mailing Address** (if Different from above/**No P.O. Box**)

**Address Type/Verified**

Resident  Non-Resident  Country of Residence \_\_\_\_\_

Dwelling Status:

Own  Rent  Board  Other

**Gender:** Male  Female

**Place of Birth:** \_\_\_\_\_ **Nationality:** \_\_\_\_\_

**Marital Status:**

Single  Married  Divorced  Widowed  Separated  Other (Please State): \_\_\_\_\_

**Foreign Nationals:**

Foreign Bank Name: \_\_\_\_\_ Bank Phone #: \_\_\_\_\_

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

Account #: \_\_\_\_\_

Type of Reference Received: \_\_\_\_\_ Authority Type: \_\_\_\_\_

## SECTION B - EMPLOYMENT INFORMATION

**Current employer:**

**Employer address:**

Phone:

Fax:

Email:

Occupation/Job Title:

Permanent   
Contract   
Self Employed   
Temporary

Date of Employment: \_\_\_\_\_

Annual Income: \_\_\_\_\_

Evidence of Employment:

Job Letter  Pay Slip  Contract  Other

## SECTION C – FINANCIAL OBLIGATION REGULATION

Are you a Business Owner? YES  NO

Beneficial  Fiduciary  Other Legal Arrangement

Registered Name: \_\_\_\_\_ Registration #: \_\_\_\_\_

Business Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**Are You a Politically Exposed Person (P.E.P)?** Yes  No

**PEP means a person who is or was entrusted with prominent public functions – Refers to any category/relative/associate from this list:**

- Head of State ( )
- Head of Government ( )
- Senior Members of the Legislature e.g. Speaker of the House & President of Senate ( )
- Senior Politicians e.g. Members of Parliament, Government Ministers, Mayors, Leader of Opposition Chairman & Chief Secretary of the T.H.A., Parliamentary Secretaries ( )
- Senior Government Officials e.g. Permanent Secretaries, Chief Technical Officers & Ambassador or High Commissioner, Assistant Commissioner of Police or higher rank ( )
- Judicial Officials e.g. Magistrates, Judges of the Supreme Court, Judges of the Industrial Court, Judges of the Caribbean Court of Justice ( )
- Military Officials – Lieutenant Colonel or higher rank ( )
- Senior Executives of State Owned Corporations e.g. Members of the Boards of all Statutory Bodies and State Enterprises including the CONTROLLING Interest of State ( )
- Senior Political Party Officials e.g. Chairman, Political Leader & Deputy Political Leader ( )

**IF YES IDENTIFY MEANS**

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**SECTION D:**

**Remuneration:**

Under \$5,000  \$5001 - \$10,000  \$10,001 – 15,000  \$15,001 - \$20,000  \$20,001 - \$30,000   
\$30,001 - \$40,000  Over \$40,000

**Assets**

Under \$100,000  \$100,001 - \$250,000  \$250,001 - \$350,000  \$350,001 - \$500,000  Over \$500,000

**SECTION E – STUDENT APPLICATION**

Name of School:	Address:	Form/Class/Year:

**SECTION F – (UNDER 16 YEARS)**

Parent/Guardian Name:	Relationship:

Parent/Guardian Address:	Place of Work:

Telephone Contact:	Identification:	Occupation:
Work#: _____	ID#: _____	
Home#: _____	DP#: _____	
Cell #: _____	PP#: _____	
Email: _____	Other: _____	

**SECTION G – RECOMMENDER:**

Recommended by: Staff  Member  Relative  Other

Name	Address	Account #

**DECLARATION:**

**I hereby apply for membership in Mt. Pleasant Credit Union Co-operative Society Limited, and, if admitted, I agree to conform to the Bye-Laws or amendments thereof of the said Society, and pledge to offer my skills toward the growth of the Credit Union.**

Are you a Member of another Credit Union? Yes No

If Yes:

Name of Credit Union: \_\_\_\_\_

Are You Serving on a Credit Union/State Board of Directors/Committee? Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes: Name of Board & Credit Union:
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**APPOINTMENT OF NOMINEE:**

**In the event of sickness or death, I \_\_\_\_\_ hereby nominate the following person/s to receive any monies accruing to me in the Society not exceeding Five Thousand Dollars (\$5,000.00) in accordance with Bye Law #10 of the Mt. Pleasant Credit Union Co-operative Society Ltd:**

1. Name:	Relationship:
2. Name:	Relationship:

_____	_____	_____
<b>Applicant's Signature</b>	<b>Signature of MPCU Representative</b>	<b>Date</b>
_____	_____	
<b>Applicant's Name (BLOCK LETTERS)</b>	<b>Name of MPCU Representative (BLOCK LETTERS)</b>	

<b>Account Fees</b>	<b>How did you hear about us?</b>
Entrance Fee: \$ _____	Facebook <input type="checkbox"/>
Pass Book: \$ _____	Radio <input type="checkbox"/>
Rule Book: \$ _____	Newspaper <input type="checkbox"/>
Shares: \$ _____	Other _____
Deposits: \$ _____	
Total: \$ _____	

**For Official Use Only**

**MEMBER'S RISK PROFILE**      HIGH       MEDIUM       LOW

CHAIRMAN: \_\_\_\_\_

SECRETARY: \_\_\_\_\_

ACCOUNT#: \_\_\_\_\_

REFERENCE AGAINST UN 2253 LIST      YES       NO

T&T CONSOLIDATED LIST OF COURT ORDERS      YES       NO

UTILITY BILL      WATER       PHONE       ELECTRICITY       CABLE       OTHER

The account number noted on this FORM IS THE NUMERICAL REFERENCE throughout the Credit Union Records and would be used for any transactions thereafter. The applicant's name has been referenced against UN2253 list, ISIL (Da'esh) and Al-Qaida Sanctions List and FATF Recommendations of NCCT's and the Consolidated List of Court Orders issued by the High Court of Justice of the Republic of Trinidad and Tobago.

_____	_____	_____
<b>AUTHORISED SIGNATURE</b>	<b>Date</b>	<b>COMPLIANCE OFFICER SIGNATURE</b>

**\* THIS SECTION IS NOT APPLICABLE FOR NEW MEMBERS**

**Date RETROPECT DUE DILIGENCE was conducted** \_\_\_\_\_

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