



**NIZARI**  
PROGRESSIVE FEDERAL  
CREDIT UNION

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## POST EDUCATION STUDENT LOAN CONSOLIDATION APPLICATION

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### Terms & Conditions:

- Combine several student loans into one loan
- Borrower can consolidate education loans only after they have a minimum of 1 year employment history
- Borrower must be able to provide proof of income for at least past 1 year AND current proof of income
- Borrower must provide copy of Degree/Diploma and transcripts of final semester
- Borrower must provide Pay off letter of existing student loans to determine the loan amount and to pay off existing loans
- Variable Rate - Rate will be adjusted every quarter at prime plus 2.5%
- Floor 5.75%
- Payments start within 60 days of disbursement
- Terms - up to 10 years

Guarantors may be required.

INCOMPLETE Loan Applications will not be processed. Supporting documents must accompany application

All the above terms and conditions are subject to change. Some restrictions may apply.

*Disclosure Statement: To the best of my knowledge, everything disclosed on this form is true and complete. I authorize the Lender, its agent and/or my school to gather credit information about me. A consumer report (credit report) may be obtained from a consumer-reporting agency (credit bureau) in connection with this Application. If I request (1) I will be informed whether or not consumer reports were obtained, and (2) if reports were obtained, I will be informed of the names and addresses of the credit bureaus that furnished the reports. If the Application is approved, a consumer credit report may be requested or used in connection with renewals or extensions of any credit for which I have applied, reviewing my loan, taking collection action on my loan, or legitimate purposes associated with my loan. I further authorize my school to receive, provide, and confirm information regarding my attendance, financial aid, or status as may be relevant to consideration of this application. I understand that the proceeds of this loan must be used for educational purposes. This application and supporting documentation remain the property of the Lender. I further understand that if this application is approved, it will be subject to the terms and conditions of the credit agreement.*

*Important information about procedures for opening a new account: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.*

**August 2014**

NIZARI PROGRESSIVE FEDERAL CREDIT UNION  
11770 University Blvd.  
Sugar Land, TX, 77478  
TEL: (281) 921-8500 Fax: 281-921-8551



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 Sugar Land, Texas 77478  
 281-921-8500  
 Fax: 281-921-8550  
 www.nizaricu.org

# APPLICATION

There are costs associated with the use of a credit card. Information about costs, rates and fees may be contained in disclosures provided with this application or by calling us toll-free or collect at \_\_\_\_\_ or writing to us at the address stated on this application.

**Check below to indicate the type of credit for which you are applying. Married Applicants may apply for a separate account.**

**Individual Credit:** You must complete the Applicant section about yourself and the Other section about your spouse if

1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI)
2. your spouse will use the account, or
3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.

**Joint Credit:** Each Applicant must **individually** complete appropriate section below. If Co-Borrower is spouse of the Applicant, mark the Co-Applicant box.

**LOANLINER Account/Loan:**  Individual  Joint  
 (Including ATM/Debit card access to the account if available)

**Credit Card Account:**  Individual  Joint

Personal  Secured  Signature  Auto  Equipment  Student

If this is an application for joint credit, Applicant and Co-Applicant each agree and acknowledge the intent to apply for joint credit (sign below):

Applicant	Date
<b>X</b>	(Seal)

Co-Applicant	Date
<b>X</b>	(Seal)

Amount Requested \$  
 Purpose/Collateral:

Credit Limit Requested \$  
 If Authorized User, Name:

**PAYMENT PROTECTION** Are you interested in having your loan protected?  YES  NO

If you answer "yes", the credit union will disclose the cost to protect your loan. The protection is voluntary and does not affect your loan approval. In order for your loan to be covered, you will need to sign a separate application that explains the terms and conditions.

APPLICANT				OTHER <input type="checkbox"/> CO-APPLICANT <input type="checkbox"/> SPOUSE <input type="checkbox"/> OTHER			
NAME (Last - First - Initial)				NAME (Last - First - Initial)			
ACCOUNT NUMBER		SOCIAL SECURITY NUMBER		ACCOUNT NUMBER		SOCIAL SECURITY NUMBER	
BIRTH DATE		EMAIL ADDRESS		BIRTH DATE		EMAIL ADDRESS	
HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.		HOME PHONE	CELL PHONE	BUSINESS PHONE/EXT.	
DRIVER'S LICENSE NUMBER/STATE		AGES OF DEPENDENTS		DRIVER'S LICENSE NUMBER/STATE		AGES OF DEPENDENTS	
PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT	PRESENT ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT
			LENGTH AT RESIDENCE				LENGTH AT RESIDENCE
PREVIOUS ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT	PREVIOUS ADDRESS (Street - City - State - Zip)			<input type="checkbox"/> OWN <input type="checkbox"/> RENT
			LENGTH AT RESIDENCE				LENGTH AT RESIDENCE
MORTGAGE/RENT OWED TO				MORTGAGE/RENT OWED TO			
MORTGAGE BALANCE \$	MONTHLY PAYMENT \$	INTEREST RATE %		MORTGAGE BALANCE \$	MONTHLY PAYMENT \$	INTEREST RATE %	
COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)				COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (Single - Divorced - Widowed)			
EMPLOYMENT/INCOME				EMPLOYMENT/INCOME			
START DATE				START DATE			
EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME				EMPLOYMENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME			
NAME AND ADDRESS OF EMPLOYER				NAME AND ADDRESS OF EMPLOYER			
<b>NOTICE:</b> ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.				<b>NOTICE:</b> ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.			
EMPLOYMENT INCOME PER \$		OTHER INCOME PER \$		EMPLOYMENT INCOME PER \$		OTHER INCOME PER \$	
TITLE/GRADE		SOURCE		TITLE/GRADE		SOURCE	

PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS				PREVIOUS EMPLOYER NAME AND ADDRESS IF EMPLOYED LESS THAN FIVE YEARS				
STARTING DATE		ENDING DATE		STARTING DATE		ENDING DATE		
<b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____ ENDING/SEPARATION DATE _____				<b>MILITARY:</b> IS DUTY STATION TRANSFER EXPECTED DURING NEXT YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE _____ ENDING/SEPARATION DATE _____				
<b>REFERENCE</b>				<b>REFERENCE</b>				
NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU				
RELATIONSHIP _____				HOME PHONE _____		RELATIONSHIP _____		
HOME PHONE _____				HOME PHONE _____				
<b>WHAT YOU OWE</b>								
DEBT	CREDITOR NAME OTHER THAN THIS CREDIT UNION (Attach additional sheet(s) if necessary)	INTEREST RATE	PRESENT BALANCE	MONTHLY PAYMENT	OWED BY			
					APPLICANT	OTHER		
<input type="checkbox"/> RENT <input type="checkbox"/> FIRST MORTGAGE (Incl. Tax & Ins.)		%	\$	\$	<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"/>		
		%	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>		
LIST ANY NAMES UNDER WHICH YOUR CREDIT REFERENCES AND CREDIT HISTORY CAN BE CHECKED:			<b>TOTALS</b>	\$	\$	<input type="checkbox"/>	<input type="checkbox"/>	
<b>WHAT YOU OWN</b>								
ASSET DESCRIPTION	LIST LOCATION OF PROPERTY OR FINANCIAL INSTITUTION	MARKET VALUE	PLEGGED AS COLLATERAL FOR ANOTHER LOAN				OWNED BY	
			<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	APPLICANT	OTHER
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
		\$	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	<input type="checkbox"/>
<b>OTHER INFORMATION ABOUT YOU</b>							<b>APPLICANT</b>	<b>OTHER</b>
IF YOU ANSWER "YES" (BY CHECKING THE BOX) TO ANY QUESTION OTHER THAN #1, EXPLAIN ON AN ATTACHED SHEET							<input type="checkbox"/>	<input type="checkbox"/>
1. ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT ALIEN?							<input type="checkbox"/>	<input type="checkbox"/>
2. DO YOU CURRENTLY HAVE ANY OUTSTANDING JUDGMENTS OR HAVE YOU EVER FILED FOR BANKRUPTCY, HAD A DEBT ADJUSTMENT PLAN CONFIRMED UNDER CHAPTER 13, HAD PROPERTY FORECLOSED UPON OR REPOSSESSED IN THE LAST 7 YEARS, OR BEEN A PARTY IN A LAWSUIT?							<input type="checkbox"/>	<input type="checkbox"/>
3. IS YOUR INCOME LIKELY TO DECLINE IN THE NEXT TWO YEARS?							<input type="checkbox"/>	<input type="checkbox"/>
4. ARE YOU A CO-MAKER, CO-SIGNER OR GUARANTOR ON ANY LOAN NOT LISTED ABOVE?							<input type="checkbox"/>	<input type="checkbox"/>
FOR WHOM (Name of Others Obligated on Loan):							<input type="checkbox"/>	<input type="checkbox"/>
TO WHOM (Name of Creditor):							<input type="checkbox"/>	<input type="checkbox"/>

**STATE LAW NOTICE(S)**

**Notice to Nebraska Residents:** A credit agreement must be in writing to be enforceable under Nebraska law. To protect you and us from any misunderstandings or disappointments, any contract, promise, undertaking, or offer to forebear repayment of money or to make any other financial accommodation in connection with this loan of money or grant or extension of credit, or any amendment of, cancellation of, waiver of, or substitution for any or all of the terms or provisions of any instrument or document executed in connection with this loan of money or grant or extension of credit, must be in writing to be effective.

**Notice to New York Residents:** New York residents may contact the New York State Department of Financial Services to obtain a comparative listing of credit card rates, fees, and grace periods. New York State Department of Financial Services: 1-800-342-3736 or www.dfs.ny.gov.

**Notice to Ohio Residents:** The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

**Notice to Wisconsin Residents:** (1) No provision of any marital property agreement, unilateral statement under Section 766.59, or court decree under Section 766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agreement, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

Signature for Wisconsin Residents Only	Date
X	(Seal)

**CONSENSUAL SECURITY INTEREST**

You grant us a security interest in all individual and joint share and/or deposit accounts you have with us now and in the future to secure your credit card account. Shares and deposits in an IRA or any other account that would lose special tax treatment under state or federal law if given as security are not subject to the security interest you have given in your shares and deposits. You may withdraw these other shares unless you are in default. When you are in default, you authorize us to apply the balance in these accounts to any amounts due. For example, if you have an unpaid credit card balance, you agree we may use funds in your account(s) to pay any or all of the unpaid balance.

By signing or otherwise authenticating below, you are affirmatively agreeing that you are aware that granting a security interest is a condition for the credit card and you intend to grant a security interest. You acknowledge and agree that your pledge does not apply during any periods when you are a covered borrower under the Military Lending Act. For clarity, you will not be deemed a covered borrower, and your pledge will apply, if: (i) you become obligated on a credit transaction or establish an account for credit when you are not a covered borrower; or (ii) you cease to be a covered borrower.

Security Interest Acknowledgement and Agreement	Date
X	(Seal)

Security Interest Acknowledgement and Agreement	Date
X	(Seal)

**SIGNATURES**

By signing or otherwise authenticating below:

1. 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, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information in this application and your credit report 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 crime to willfully and deliberately provide incomplete or incorrect information in this application.
2. If you are applying for a credit card, you understand that the use of your card will constitute acknowledgment of receipt and agreement to the terms of the Consumer Credit Card Agreement and Disclosure.

Applicant's Signature	Date
X	(Seal)

Other Signature	Date
X	(Seal)

**CREDIT UNION USE ONLY**

DATE	<input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED <small>(Adverse Action Notice Sent)</small>	APPROVED LIMITS:	SIGNATURE \$	LINE OF CREDIT \$	OTHER \$	OTHER \$	DEBT RATIO/SCORE BEFORE AFTER
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LOAN OFFICER COMMENTS:

Credit Committee or Loan Officer Signatures

	Date
X	(Seal)

	Date
X	(Seal)

## GUARANTOR'S PROFILE – MUST ALSO COMPLETE THE IRS FORM 4506-T (ATTACHED)

APPLYING FOR \$		BORROWER ACCOUNT #		GUARANTOR ACCOUNT #	
BORROWER'S NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
GUARANTOR'S NAME	LAST NAME	FIRST NAME	MIDDLE NAME		
SON / DAUGHTER OF					
LEGAL STATUS	<input type="checkbox"/> U.S.	<input type="checkbox"/> G.C.	<input type="checkbox"/> W.P.	<input type="checkbox"/> L-1	<input type="checkbox"/> E-2
	<input type="checkbox"/> H-1	<input type="checkbox"/> S.S.			
SOCIAL SECURITY #		DOB	Driver's License #		
SPOUSE	SOCIAL SECURITY #		<input type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED		
STREET ADDRESS					
CITY		STATE	ZIP CODE		
HOME PH	WORK PH		CELL PH		
<b>EMPLOYMENT</b>					
NAME OF EMPLOYER					
STREET ADDRESS					
CITY		STATE	ZIP CODE		
POSITION	START DATE		HOURS AT WORK		
CITY	STATE		ZIP CODE		
<b>NAME OF BUSINESS/EMPLOYER</b>	<b>OWNERSHIP (0% TO 100%) OR POSITION</b>		<b>MONTHLY INCOME</b>	<b>HOW LONG</b>	
1.			\$		
2.			\$		
3.			\$		
<b>ADJUSTED GROSS INCOME ON LAST 2 YEARS TAX RETURNS</b>					
YEAR:	AMOUNT: \$	<b>ASSETS</b>	-	<b>LIABILITIES</b>	= <b>CURRENT NET WORTH</b>
YEAR:	AMOUNT: \$				
<b>SIGNATURE</b>					
<p>You promise that everything you have stated in this profile is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize Nizari Progressive Federal Credit Union to obtain credit reports in correlation with this application for credit and for any update, increase renewal, extension or collection of the credit received.</p> <p><b>I fully understand that in case the borrower fails to make his or her payments, I will be responsible for 100% of the loan amount and Nizari Progressive Federal Credit Union may also debit my account up to the full amount of the outstanding loan.</b></p>					
<div style="border: 1px solid black; width: 100%; height: 40px; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 2em; font-weight: bold;">X</span> </div>					
Guarantor Signature				Date	