

STUDENT OPEN END LOAN APPLICATION

Terms & Conditions:

- Students who have completed high school and wish to pursue further education at undergraduate level and above, and for community colleges & vocational training in the United States of America.
- Loan will be approved for accredited educational institutions. Refer to this website http://ope.ed.gov/accreditation.
- Interest will accrue from check disbursement date.
- Students must take a minimum of 12 credit hours each semester.
- Student loan for Tuition, Books and Campus Boarding will be up to a maximum amount of \$25,000 per academic year, to be paid directly to the Institution.
- One guarantor is required with a minimum AGI of \$ 50,000; otherwise, two guarantors each with a minimum AGI of \$25,000.
- Student is required to submit proof of completion of high school education, admission to a program of study for which loan is applied, credit hours for each semester and statement of tuition, books and campus boarding.
- Maximum repayment period: 180 months (payment starts 6 months after graduation)
- Minimum Cumulative GPA: 2.5
- Student will be required to submit transcript to Nizari PFCU within 15 days of completion of semester. In the event
 student drops out and discontinues the course of study, the Student Open End Loan Program amortization
 (installment) will become due with immediate effect and the borrower will be required to make regular monthly
 payment towards the Student Open End Loan.
- The Annual Percentage Rate (APR) for our Student Open End Loan Program is Variable and is determined by using the Wall Street Journal Prime Rate Index plus a margin determined in the sole discretion of Nizari PFCU.

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.



Student Open End Loan Application

PLEASE PRINT

New Acct?	Member #	Raise Limit	? Credit Limit Re	equest							
☐ YES		☐ YES	\$			Date:					
☐ NO		☐ NO	Ψ								
Type of Credit											
☐ Individual Credit. Ma	rried applicants may	y apply for individu	al credit.								
Complete Sections 1, 3, and 5 below. Also complete Section 2 below about your spouse if:											
(a) your spouse will be permitted to use the Account, (b) you are relying on your spouse's income as a basis for repayment, (c) you reside in a community property state (TX, LA, NM, AZ, NV, WA, WI, ID, AK) or you are relying on property located in a community property state as a basis for repayment of the credit requested, or (d) you are relying on alimony, child support, or separate maintenance payments from a spouse or former spouse as a basis for repayment.											
	ts must complete Se	ection 4.		Joint Applicant mus	st complete Se	ection 2 and	sign below as Joint /	Applicant. Both			
	ck here if the Joint A										
	ary Applicant must c uaranty Agreement.		1, 3, and 5. The Guar	antor must comple	te Section 2 a	nd sign belo	w as Guarantor. The	Guarantor must also			
1. Applicant											
Name					Security Pass	sword	Social Security #				
Street Address		City		State	Z	Zip		-			
		- ,				r					
D : 0: (A11		0':		Years Ther		7.	T				
Previous Street Address		City		State	۷	Z ip	Telephone Number				
				Years Ther	e		Secondary Telepho	ne Number			
Marital Status (Complete on you reside in a community propin a community property state	perty state or you are re	elying on property	Date of Birth				E-Mail Address				
□ Married□ Unmarried (single, divor□ Separated	rced, widowed)		Number of Depende	nts	Age	es	Driver's License No	. State			
Employment/Income											
Employer Name and Addr	ess	Position	on Date of	f Employment	Salary		pervisor Name	If Self-Employed Type of Business			
Previous Employer Name	and Address	Positio	on Date of	f Employment	\$ Pe		pervisor Name	If Self-Employed			
(Complete only if with current employ		1 Osluc	on Date o	Limployment	Odiary	00	ipervisor reame	Type of Business			
			Date of	f Termination	\$ P6	er					
Other Income (Alimony, C	Child Support, or S	eparate Maintena	nce Income Need N	ot be Revealed if	You Do Not W	Vish to Have	e it Considered)				
\$ Per \$ Per \$ Per	Source Source Source										
References		Name and Address Relative Not Living		Home Telephone	e Number		Rela	tionship			
		. tolailto i tot <u>Liting</u>									
2. Other Signer				"							
	☐ Guarantor										
Name					Security Pass	sword So	ocial Security #				
Ctroot Addro		Oir.		C+-+-	-	7:0		-			
Street Address		City		State Years Ther		Zip					
Previous Street Address		City		State		Žip Te	elephone Number				
		•		Years Ther		_	econdary Telephone	Number			

Marital Status (Complete only if this is an applica					E-Mail Address					
you reside in a community property state or you are in a community property state as a basis of repayments.		rty								
☐ Married☐ Unmarried (single, divorced, widowed)										
☐ Separated		Number of Dependents		Ages	Driver's License No.	State				
Employment/Income	Employer Nan	me and Address								
Position		Date of Employment		Salary	Supervisor Name	If Self-Employed				
				\$ Per		Type of Business				
Previous Employer Name and Address	F	Position Date of Emp	ployment	Salary	Supervisor Name	If Self-Employed				
(Complete only if with current employer fewer than five years)					Type of Business				
		Date of Ten	mination	\$ Per						
Other Income (Alimony, Child Support, or	Senarate Main	ntenance Income Need Not be	Revealed if You D	o Not Wish to	Have it Considered)					
\$ Per Source	oopulato mun				maro n comercion,					
\$ Per Source \$ Per Source										
	Name and Ad	Idress of Nearest Relative	Home Telephone	Number	Relationship					
References	Not Living Wit									
3. Applicant Additional Information										
Applicant Assets (list property you own)		Location of Property	Market Value		Is this property serving as security another obligation?					
	ntly Owned		\$							
	ntly Owned		\$							
	ntly Owned		\$							
☐ Joi	ntly Owned		\$							
	ntly Owned		\$							
Applicant Debt	ntly Owned		\$							
List All Debts		Creditor	Loan	Balance	Mo	onthly Payment				
			\$		Φ.	200				
			\$		\$	per per				
			\$		\$	per				
			\$		\$	per				
			\$		\$	per				
A 4b		-ldi		h = = 1 = = = = = = = = = = = = = = = =	1-4					
Are there any outstanding judgments, garni had property repossessed?	[] Yes	[] No								
Do you anticipate any significant decreases	[]Yes	[] No								
Are you a maker, indorser, or guarantor on	any other debt y	you have not told us about?			[]Yes	[] No				
Are you required to make alimony, child support, or separate maintenance payments to someone else? [] Yes [] No [] yes, what is the payment amount? \$										
If yes, what is the payment amount? \$ per										
4. Joint Credit										
If this is an Application for Joint Credit, both Applicants must initial here to indicate their intent to apply for joint credit.										

	STATE	NOTICES	
	dit reporting agencies main	ntain separate credit histories	s make credit equally available to all on each individual upon request. The
WISCONSIN RESIDENTS: Marital Status:	☐ Married	☐ Unmarı	ied
If married: the name of my spouse is			
Spouse's SSN:	Spouse's Address	(if different)	
affect the rights of the Credit Union unless the terms, before the credit is granted or the according	Credit Union is furnished unt is opened. /ING FOR AN INDIVIDUA	a copy of the agreement, state L ACCOUNT: In accordance	ourt decree under Section 766.70 will adversely ement or decree, or has actual knowledge of its with Wisconsin Statutes section 766.55(1) by arriage or family of the Borrower(s).
3 11	, 0	X	
is accurate and complete. You understand that we you have provided materially changes. It is a federa credit union. You understand that, if approved, the connection with this Application and, if approved investigate your credit history and background by or You expressly agree that the credit union and its a	are relying on this information al crime punishable by fine an e Account will be governed by , maintenance of your Accoun obtaining your credit reports. You gents and assigns may contact incur charges under your cell pl	in our decision to extend credit, a d/or imprisonment to knowingly m and subject to the Personal Line t, you authorize Nizari Progressiv u also authorize the credit union to tyou about your Account using ar none plan. You expressly consent	Information provided in connection with this Application and you promise to notify us promptly if any information ake a false statement in a loan application to a federal of Credit Agreement and any amendments thereto. It are Federal Credit Union and its agents and assigns to answer questions about its credit experience with you by contact information you have provided, including any to the use of any automatic telephone dialing equipment are subject to change.
X Primary Applicant	Date	X Joint Applicant	Date
X Guarantor	Date	X Other Signer	Date

SCHOOL INFORM	MATI	ON									
SCHOOL NAME											
SCHOOL ADDRESS											
CITY/ STATE/ ZIP	CODE										
PHONE NUMBER											
PROGRAM OF ST	UDY										
DEGREE PLAN		Asso	ciates		Undergraduate	es	☐ Graduates		PDH/ M.D.		Vocational
GRADE LEVEL (YE	AR)		1st Year	r	☐ 2nd Ye	ear	☐ 3rd Year	C	4th Year		
EXPECTED GRAD	UATIO	N DAT	E (MM/YY	YY)							
ACADEMIC PERIO	D FRO	MC (MC	M/DD/YYYY	/DD/YYYY) TO							
LOAN AMOUNT	Γ										
AMOUNT REQUE	STED										
EXISTING LOAN	INFC	RMAT	ION								
EXISTING STUDE	NT LO	AN OUT	STANDING	ì	\$						
LOAN BEING AVA	ALED F	ROM									
DATE LOAN RECE	IVED			REPAYMENT DATE							
Student's Signatu By signing this app X Co-signers Signatu X Co-signers Signatu	ture	n below,	you certify	that	you intend to (i) o	apply j	for joint credit and	l (ii) be j	Date iointly liable with Date Date	the Stud	dent for this loan.
l											

GUARANTOR'S PROFILE –	MUST A	LSO CO	MPLETE THE IF	RS FC)RM 45	506-T (AT	TACHED)		
APPLYING FOR \$	BORROWER ACC			OUNT# GUARA			NTOR ACCOUNT #		
BORROWER'S NAME LAST NAME	·		FIRST NAME			MIDDLE NAME			
GUARANTOR'S NAME LAST NAME	LAST NAME					MIDDLE NAME			
SON / DAUGHTER OF									
LEGAL STATUS U.S.	☐ G.C.	□ W	/.P. □ L-1 □ E-2			☐ H-1 ☐ S.S.			
SOCIAL SECURITY#	В	Dri	iver's License #						
SPOUSE		SOCIAL SI	ECURITY#		☐ SINGLE	☐ SEPARATED			
STREET ADDRESS									
CITY			STATE ZIP COL			E			
HOME PH	WORK F	PH			CELL PH				
EMPLOYMENT									
NAME OF EMPLOYER									
STREET ADDRESS				Ţ					
CITY			STATE ZIP COD)E			
POSITION			START DATE			HOURS AT WORK			
SUPERVISOR NAME			IF SELF EMPLOYED,	TYPE C	F BUSINE	ESS			
NAME OF BUSINESS TYPE O BUSINES			OWNERSHIP (0% TO 100%) OR POSITION			MONTHLY INCOME HOW LON			
1.			\$						
2.			\$						
3.					\$				
ADJUSTED GROSS INCOME ON LAS	ST 2 YEARS	S TAX RET	URNS						
YEAR: AMOUNT: \$			ASSETS -	Ll	ABILITIES	= CURRI	ENT NET WORTH		
YEAR: AMOUNT: \$									
		SI	GNATURE						
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.									
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.									
X									
Guarantor Signature						Date			