Progressive CREDIT UNION
CO-OPERATIVE SOCIETY LIMITED
YOUR ACHIEVEMENT, OUR GOAL

☐ 48 & 50 Chacon Street
San Fernando
Tel: 235-4931

☐ #80 2nd Street,
Barataria
Tel 235-4931

☐ Unit 19, Sangster's Hill Mall,
Scarborough, Tobago.
Tel: 235-4931

MEMBERSHIP APPLICATION FORM

revised 11 April 2017

SECTION A - PERSONAL DETAILS

Date: .....

Name of Applicant: Member A/C # .....

..... Employee #: .....
First Middle Surname

Home Address: .....

Mailing Address: .....

Nationality .....

Tel. Nos: Home : ..... Cell: ..... Email: .....

Date of Birth: ..... /..... /..... I.D#:..... Passport/D.P. #: .....

Occupation : ..... Employer/Location: .....

Business/Employer's Address: .....

..... Telephone #: .....

Sources of Other Income: .....

Total Monthly Income: ☐ 0 - 4,999 ☐ 5,000 - 9,999 ☐ 10,000 - 19,999 ☐ over 20,000

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Common-Law

Name of Spouse: ..... Related Parties :.....

Spouse Telephone # Work :..... Cell: ..... No. of Dependent: .....

Reason/Purpose of Account: ☐ Savings ☐ Loan ☐ Insurance ☐ Other (Specify)

Reference: (1) ..... Relationship ..... Tel No. .....

Address: .....

Reference: (2) ..... Relationship ..... Tel No. .....

Address: .....

SECTION B - BENEFICIARY DETAILS

Beneficiary: ..... Relationship: ..... Tel No. .....

Address: .....

DECLARATION

I hereby apply for membership in the Progressive Credit Union Co-operative Society Ltd and if admitted, I agree to conform to the Bye-Laws or amendments thereof of the said Society.

SIGNATURE OF APPLICANT: _____ **Date of Application:** _____

SIGNATURE OF WITNESS: _____ **Recommender:** _____

SECTION C: POLITICALLY EXPOSED PERSON (P.E.P.)

Are you a current or former member of any of the following classes:

i. Heads of Government or State? ☐ YES ☐ NO

ii. Senior official in the executive, legislative, administrative or judicial branch of a local or foreign government, whether elected or not? ☐ YES ☐ NO

iii. Senior politician or senior official of a major political party? ☐ YES ☐ NO

iv. Senior executive of a government-owned commercial enterprise? ☐ YES ☐ NO

v. Senior military official? ☐ YES ☐ NO

vi. An immediate family member of a person mentioned in paragraphs (i) to (v) meaning the spouse, parents, siblings or children of that person and the parents, siblings and additional children of the person's spouse whether half or whole blood? ☐ YES ☐ NO

vii. Close personal or professional associate of a person mention in paragraphs (i) to (v) above? ☐ YES ☐ NO

If yes, provide details:

.....

.....

.....

Name of Applicant: ..... Date: .....
(PLEASE PRINT)

Signature of Applicant: .....

.....

SECTION D - CUSTOMER DUE DILIGENCE

REFERENCED AGAINST _____ YES ☐ NO ☐ _____

REFERENCED AGAINST T&T CONSOLIDATED LIST OF COURT ORDERS YES ☐ NO ☐ _____

REFERENCE AGAINST OTHER LIST (CFAFT/FATF) YES ☐ NO ☐ _____

DETAILS _____

DOCUMENTS ATTACHED

Utility Bill Type: _____ ☐ YES ☐ NO

Identification ☐ YES ☐ NO

Job Letter/ Payslip ☐ YES ☐ NO

FOR OFFICIAL USE ONLY

Approved: _____ Date: _____

Secretary: _____ Date: _____

President: _____ Date: _____