SKYWARD CREDIT UNION
Four Cessna Boulevard, Wichita, Kansas 67215
P.O. Box 771069, Wichita, Kansas 67277-1069
Toll Free: (833) 759-1941
FAX: (316) 779-8966
www.skywardcu.com

LOAN APPLICATION

Married Applicants may apply for a separate account. Check the appropriate box to indicate Individual Credit or Joint Credit.

☐ **Individual Credit:** Complete **Applicant** sections if only the applicant's income is considered for loan approval.

Complete **Applicant** and **Co-Applicant** sections: (1) if you are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of credit requested; (2) if you reside in a Community Property State; (3) if you are relying on property located in a Community Property State as a basis for repayment of the credit requested; or (4) if you are an Alaska resident subject to a community property agreement or community property trust. Community Property States include: AZ, CA, ID, LA, NM, NV, TX, WA, and WI.

☐ **Joint Credit:** Complete **Applicant** and **Co-Applicant** sections if your co-applicant will be contractually liable for repayment of the loan and initial below:

We intend to apply for joint credit. _____ (Applicant Initials) _____ (Co-Applicant Initials)

PLEASE CHECK BELOW TO INDICATE THE TYPE OF ACCOUNT(S) AND TYPE OF CREDIT FOR WHICH YOU ARE APPLYING.

☐ **Account/Loan:** ☐ Individual ☐ Joint

(Including ATM/Debit Card Access to the Account if Available)

Amount Requested $_____

Purpose/Collateral: _____

☐ Other Loan Request _____

Credit Cards: Number of Cards

☐ Skyward Mastercard _____

☐ Skyward Rewards Mastercard _____

_____ _____

If Authorized user, name Date of Birth

SEE PAGE 3 FOR IMPORTANT INFORMATION ABOUT CREDIT CARDS

Repayment: ☐ Payroll Deduction ☐ Billing Notice ☐ Automatic Payment ☐ Web Pay ☐ Other

APPLICANT			☐ **CO-APPLICANT** ☐ **NON-APPLICANT SPOUSE/OTHER**		
NAME (Last - First - Initial)		ACCOUNT NUMBER	NAME (Last - First - Initial)		ACCOUNT NUMBER
SOCIAL SECURITY NUMBER		MOTHER'S MAIDEN NAME	SOCIAL SECURITY NUMBER		MOTHER'S MAIDEN NAME
E-MAIL ADDRESS		FAX NUMBER	E-MAIL ADDRESS		FAX NUMBER
BIRTH DATE	HOME PHONE/CELL	BUSINESS PHONE/EXT.	BIRTH DATE	HOME PHONE/CELL	BUSINESS PHONE/EXT.
PRESENT ADDRESS (Street - City - State - Zip)		☐ OWN ☐ RENT YEARS/MONTHS AT THIS ADDRESS	PRESENT ADDRESS (Street - City - State - Zip)		☐ OWN ☐ RENT YEARS/MONTHS AT THIS ADDRESS
PREVIOUS ADDRESS (Street - City - State - Zip)			PREVIOUS ADDRESS (Street - City - State - Zip)		
PURCHASE PRICE OF HOME: $	PRESENT HOME VALUE: $		PURCHASE PRICE OF HOME: $	PRESENT HOME VALUE: $	
MORTGAGE BALANCE $	MONTHLY PAYMENT (MORTGAGE/RENT) $		MORTGAGE BALANCE $	MONTHLY PAYMENT (MORTGAGE/RENT) $	
PLEASE COMPLETE ONLY IF YOU ARE APPLYING FOR JOINT CREDIT, SECURED CREDIT, OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE. ☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)			PLEASE COMPLETE ONLY IF YOU ARE APPLYING FOR JOINT CREDIT, SECURED CREDIT, OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE. ☐ MARRIED ☐ SEPARATED ☐ UNMARRIED (Single - Divorced - Widowed)		

EMPLOYMENT

NAME AND ADDRESS OF EMPLOYER		NAME AND ADDRESS OF EMPLOYER	
HIRE DATE	POSITION	HIRE DATE	POSITION
PRIOR EMPLOYER		PRIOR EMPLOYER	

INCOME

OTHER INCOME NOTICE: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.	**OTHER INCOME NOTICE:** Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered.
INCOME $ PER	INCOME $ PER

REFERENCES

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME NUMBER	NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	HOME NUMBER
	RELATIONSHIP		RELATIONSHIP

COPYRIGHT 2005 Securian Financial Group, Inc. All rights reserved.

STATE NOTICES

OHIO RESIDENTS ONLY: 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.

WISCONSIN RESIDENTS ONLY: Marital Status: ☐ Married ☐ Unmarried ☐ Legally Separated

If married: the name of my spouse is _____

Spouse's SSN: _____ ☐ Spouse's Address (if different) _____

Notice: 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.

MARRIED WISCONSIN RESIDENTS APPLYING FOR AN INDIVIDUAL ACCOUNT: By signing here, I state that the credit being applied for, if granted, will be incurred in the interest of the marriage or family of the Borrower(s).

X _____

SECURITY INTEREST

THE GRANTING OF THIS SECURITY INTEREST IS A CONDITION FOR THE ISSUANCE OF CREDIT UNDER THIS APPLICATION.

IF YOUR APPLICATION IS APPROVED, YOU SPECIFICALLY GRANT US A CONSENSUAL SECURITY INTEREST IN ALL INDIVIDUAL AND JOINT ACCOUNTS YOU HAVE WITH US NOW AND IN THE FUTURE TO SECURE REPAYMENT OF CREDIT EXTENDED UNDER THIS AGREEMENT. YOU ALSO AGREE THAT WE HAVE SIMILAR STATUTORY LIEN RIGHTS UNDER STATE AND/OR FEDERAL LAW. IF YOU ARE IN DEFAULT, WE CAN APPLY YOUR SHARES TO THE AMOUNT YOU OWE.

Shares and deposits in an Individual Retirement Account or any other account that would lose special tax treatment under state or federal law if given are not subject to this security interest.

If you have other loans with us, collateral securing such loans will also secure your obligations under this Agreement, unless that other collateral is your principal residence or non-purchase money household goods.

_____ (Applicant Initials) _____ (Co-Applicant Initials)

LOAN APPLICATION SIGNATURES

PLEASE READ BEFORE SIGNING:

All the information in this application is true. I understand that section 1014 Title 18 U.S. Code makes it a federal crime to knowingly make a false statement on this application. You have my permission to check it. You may retain this application even if not approved. I understand that you may receive information from others about my credit and you may answer questions and requests from others seeking credit or experience information about me or my accounts with you. If this application is approved, I agree to honor the provisions of the credit or loan agreement and security agreement or credit card agreement covering my account or loan. (If this application is for two of us, this statement applies to both of us.)

Consumer and Credit Report Authorization. By signing this Application, I authorize you to obtain my consumer and/or credit report for the purposes of evaluating this application and to obtain subsequent credit reports on an on-going basis in connection with this transaction, and for all other legitimate purposes, such as reviewing my accounts or taking collection action on the account. I authorize you to receive and review other information about me, such as my employment and income information, from third-parties or consumer reporting agencies.
Vermont Residents: Applicant provided consent via phone _____ (Credit Union Initials)

Permission to contact: By providing a wireless telephone number (i.e., cell phone), I consent to receiving calls, including autodialed and prerecorded message calls, from the credit union or its third party debt collector at that number.

IMPORTANT NOTICE 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 me: When I open an account, you will ask for my name, address, date of birth, and other information that will allow you to identify me. You may also ask to see my driver's license or other identifying information.

SIGNATURE OF APPLICANT	DATE	SIGNATURE OF CO-APPLICANT	DATE
X		**X**	

HAVE YOU OMITTED ANYTHING? REMEMBER: INCOMPLETE APPLICATIONS CANNOT BE PROCESSED.

COPYRIGHT 2005 Securian Financial Group, Inc. All rights reserved.

IMPORTANT CREDIT CARD DISCLOSURES

The following disclosure represents important details concerning your credit card. The information about costs of the card is accurate as of _____. You can contact us toll free at (316) 440-9690 or Four Cessna Boulevard, Wichita, Kansas 67215 to inquire if any changes occurred since the effective date.

INTEREST RATES and INTEREST CHARGES:		
	Skyward Mastercard	**Skyward Rewards Mastercard**
Annual Percentage Rate (APR) for Purchases, Cash Advances, & Balance Transfers	**1.90%** Introductory APR for 12 months from date of account opening. After that, your Standard APR will be **12.00%, 15.00%, or 18.00 %** depending on your credit history. This APR will vary with the market based on the Prime Rate.	**1.90%** Introductory APR for 12 months from date of account opening. After that, your Standard APR will be **14.00%, 17.00%, or 20.00%** depending on your credit history. This APR will vary with the market based on the Prime Rate.
Paying Interest	Your due date is at least 25 days after we mail your billing statement. We will not charge you interest on purchases if you pay your entire new purchase balance by the due date each month. We will begin charging interest on cash advances and balance transfers on the date the cash advance or balance transfer is posted to your account.	
Minimum Interest Charge	None	
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at **http://www.consumerfinance.gov/learnmore**	

FEES:	
Fees to Open or Maintain your Account	
• Annual Fee:	None
• Application Fee:	None
Transaction Fees	
• Balance Transfer:	None
• Cash Advance:	None
• Foreign Transaction:	**1%** of each transaction in U.S. dollars if the transaction involves a currency conversion **1%** of each transaction in U.S. dollars if the transaction does not involve a currency conversion
Penalty Fees	
• Late Payment:	Up to **$25.00** if your payment is late 5 days or more
• Over-the-Credit Limit:	None
• Returned Payment:	Up to **$10.00** if your payment is returned for any reason

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)."

Loss of Introductory Rate: We may end your Introductory Rate and apply the Standard APR disclosed above if you make a late payment.

Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.

COPYRIGHT 2005 Securian Financial Group, Inc. All rights reserved.