



APPLICATION FOR MEMBERSHIP

I have the honor to apply as member of the **CEBU CFI COMMUNITY COOPERATIVE**; I agree to faithfully obey the article of cooperation, By-Laws and such rules and regulations that maybe promulgated for the general membership by the Board of Directors.

I agree to make the minimum share capital as required in the By-Laws. I understand that applying for a loan is a privilege and not a matter of right.

In case I withdraw my membership the amount of ₱ 1,000.00 shall be retained in my share capital which shall be credited to withdrawal income of the coop if I fail to revive my membership within 12 months from the date of withdrawal by putting up a fresh capital.

I also understand that withdrawal of membership shall be approved by the Board of Directors before my share capital will be released.

Date of Seminar: _____

Applicant

Lecturer: _____

Signature over Printed Name

PERSONAL DATA							
Last Name:		First Name:		Middle Name:			
Date of Birth:	Age:	Sex:	Civil Status:	Tel No./Cell No.:			
House: () Owned () Rented		Address:					
Provincial Address:							
Employer's Name:				Tel No./Cell No.:			
Address:							
Position:		Salary:		No. of Years:			
Name of Spouse:							
Employer's Name:				Tel No./Cell No.:			
Address:							
Position:		Salary:		No. of Years:			
Source of Other Income (If Any)				Amount:			
Do you own a car or vehicle?			From whom acquired:				
Brand:		Model:		Year Purchased:			
Amount of Purchase:		Cash () Inst. () Amt. of Inst.:					
Do you own a Real Estate?		From whom acquired?					
Location:				Area:			
Cash () Cash Amount:		Installment ()		Amount of Installment:			
Name of Beneficiaries		Address		Date of Birth		Relationship	
REFERENCES							
Name		Address		Tel. No.		Relationship	

OTHER OBLIGATIONS:

- 1) Financing Institutions: _____ Amt. of Loan: ₱ _____ Mo. Amort _____
- 2) Name of Bank / Person: _____ Amt. of Loan: ₱ _____ Mo. Amort _____
- 3) Credit Cards
 Credit Card
 a) _____ b) _____

I hereby certify that the above statements are true and correct to the best of my knowledge.

APPLICANT
(Signature over printed name)

Confirmed by:

Chief Executive Officer