



Trustmark

St. Joseph School Tuition Loan Application

X Unsecured Term Loan				Term Requested				Loan Amount Requested			
P	urpose of Lo	an:		TUITION LOAN							
IMPORTANT INFORMATION ABOUT 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 is that when you open an account, we will ask you for your name, street address (P.O. Boxes are NOT allowed under federal law), date of birth and other information (including your Social Security or Taxpayer Identification Number) that allows us to identify you. We may also ask to see your driver's license or other identifying documents when appropriate.											
ln	Information Regarding Applicant										
Αį	oplicant Name				Social Security Number				Date of Birth	Home Phone No.	
Pł	nysical Street	Address			City State			State	Zip	Time at Address Yr. Mo.	
Mailing Address					City State			State	Zip		
Landlord or Mortgage Holder Name					Monthly Housing Payment			Own/Buying	□Rent/Lease	Other	
Employer Name								Work Phone		How Long? Yr. Mo.	
En	nployment Posit	ion		How Long? Yr. Mo.	Gross Mont	thly Income		Source of Other	Income	Gross Monthly Income	
N	earest Relative	e Not Living	With Me		Nearest Relative Address				Phone No.	Relationship	
Na	ame of Bank				Checking Acco			Checking Accou	ınt Number		
Na	ame of Bank				Savings / Certi			Savings / Certifi	ficate Number		
	Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to										
check my credit and employment history and to answer inquiries about your credit experience with me. I understand that the application for this request contains information that Trustmark is authorized to use, including but not limited to the credit bureau report, in consideration for other bank products/services unless I have instructed Trustmark otherwise. I further agree that if there are changes in my financial situation, I will let Trustmark know as soon as they occur; I will provide Trustmark with whatever financial information that may be requested so that Trustmark may remain informed about my financial situation. In the event of a default on this loan, you may discuss the details of this loan with St. Joseph School officials.											
A	Applicant's Signature:										
FOR BANK USE ONLY											
	RC#	Branch	Туре	Org. Type	Pol.Type	District	Class		Account Numbe	er	
				1 1		10					
Billing Information				llection Responsibility S = Special Ass			SIC Code		Offset Number		
	O = Reports to			O = Reports to Of	Officer 8811						
☐ Approved ☐ Declined			ed	Credit Savings Account # Officer Name: St JosephTuition Loan Program							
<u> </u>					osephTuit -	ion Loan Pr	ogram				
Assumed Field: N											