

# Application for Membership

C.S. FORM 4

No. \_\_\_\_\_ Name (Block Letters) \_\_\_\_\_

I, \_\_\_\_\_  
hereby make application for membership of the

**UNIVERSITY OF GUYANA COOPERATIVE CREDIT UNION LIMITED Reg. #1849**

and I agree to confirm to the Rules thereof, and the Co-operative Societies' Ordinance and Regulations and any amendments thereof.

I already belong to the following Co-operative Societies:-

.....  
.....

Signature:.....

Address:.....  
.....

Age (if 18 or over "Full" will suffice).....

Occupation:.....

Date:.....

Approved	Date Enrolled	

# UNIVERSITY OF GUYANA CO-OPERATIVE CREDIT UNION LIMITED

Registered No. 1849

## FORM OF NOMINATION

University of Guyana Co-operative Credit Union Ltd, Registered under the  
Co-operative Societies Act Chapter 88:01.

I, .....of.....

.....

..... in the County of .....

A member of the above name Co-operative Society hereby nominated the following  
persons to receive amounts for (proportion of my shares) opposite their names at by  
decease.

Name	Permanent Postal Address	Amount or Proportion
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(a) .....	.....	.....
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(b) .....	.....	.....
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(c) .....	.....	.....
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Dated this ..... day of ..... in the year .....

.....

Signature

### Witnesses:

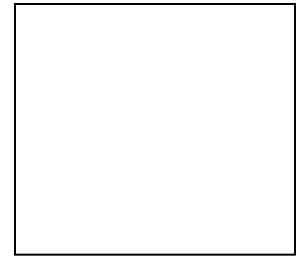
Signature

Permanent Postal Address

Occupation

1. ....	.....	.....
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2. ....	.....	.....
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Passport size picture

# UNIVERSITY OF GUYANA CO-OPERATIVE CREDIT UNION LIMITED

Registered No. 1849

## PERSONAL DATA FORM

Employer: **University of Guyana**

Name of Applicant:.....

Location: Turkeyen ( ) Tain ( ) **(Please tick appropriate Box)**

Permanent Postal Address of Applicant/Employee:

.....  
.....  
.....

Telephone: Home:..... Work: ..... Mobile: .....

Email address.....

National ID #: ..... Passport #: .....

Status: Married ( ) Single ( ) Divorced ( ) De Facto ( ) Widow/Widower ( )

**(Please tick appropriate Box)**

Name of Spouse: ..... Contact Person:.....

Address:..... Address:.....

.....

**(Other documents needed: i. Proof of address; ii. Passport size photo; iii. Copy of ID card, and iv. copy of recent payslip)**

**UNIVERSITY OF GUYANA CO-OPERATIVE CREDIT UNION  
LIMITED**

Registered No. 1849

Ordinary Shares (\$.....).....  
Special Savings (\$ .....) .....  
Special Loan (\$.....) .....  
Regular Loan (\$.....) .....  
Computer Equipment (\$.....).....  
Education Loan (\$.....) .....  
Vacation Loan (\$.....) .....  
Refinance Loan (\$.....) .....  
Total Dues (\$.....) .....  
Names (No. ....) .....  
Faculty ..... Department .....

The Deduction on Order is giving to the Bursary with effect from .....  
to the University of Guyana Co-operative Credit Union Ltd.

Signed .....



To the Bursar,

I,.....  
give consent of authorization for the deduction monthly/weekly from my salary the  
sum of .....  
(\$.....) being dues payable to the University of Guyana Credit  
Union Ltd. The first deduction to be made from my salary for the month/week  
ending .....20.....

This order supersedes all previous orders and is irrecoverable without prior  
permission of the Credit Union.

Signature .....

Post .....

Faculty/Department .....

Date .....