

**STATE OF CONNECTICUT TREASURER'S
COMMUNITY BANK & CREDIT UNION INITIATIVE
CREDIT UNION APPLICATION FORM**



Name of financial institution:
Contact name:
Contact phone number:
Contact e-mail address:
Date approved for program participation:

CREDIT UNION INFORMATION:		As of Date
Asset Size		
Total Net Worth Amount		
CRA Rating		
Capitalization Category per Primary Primary Regulator		

APPLICATION PROCESS – The Treasurer Office accepts applications between 8:00 a.m. and 9:30 a.m. EST. Applications must be submitted via this form and emailed to Jan.Hong@ct.gov and marc.gagnon@ct.gov. We will notify you by email when we receive your application. If you have not heard from us prior to 9:30 a.m., please resubmit the form and call our office to be certain it has been received.

	CD – 1	CD – 2	CD – 3	CD - 4	CD - 5
Face Amount of CD					
Interest at Maturity					
Total P&I at Maturity					
Settlement Date					
Maturity Date					

Please describe any additional collateral or insurance associated with bid.

Wire Instructions – please list instructions for wiring funds to your institution