



STO. TOMAS DE VILLANUEVA PARISH MULTI-PURPOSE COOPERATIVE

MAIN OFFICE:

#3 Gabriel St., Santolan, Pasig City
(02) 8646.6160 / 8682.4459 / 09175303252

SATELLITE OFFICE:

771-A Kamagong St., Napico, Manggahan, Pasig City
(02)8359.0364 / 09328825792

NOTE: Please do not leave any blank space. If field is not applicable, please write "N/A". Application processing will start only upon submission of all required documents.

PERSONAL INFORMATION

First Name		Middle Name		Last Name	
Account Number		Date of Birth		Age	Place of Birth
Civil Status	Gender	No. of Dependents		Educational Attainment	Nationality
Home Phone Number		Mobile Number		Email Address	Facebook Account
Present Home Address			Status of Residency		Length of Stay
Permanent Home Address			Status of Residency		Length of Stay
Previous Home Address			Status of Residency		Length of Stay
Are you related to any STVPMPC Officers or Employees?		No	Yes. Please provide name and relationship.		

EMPLOYMENT / BUSINESS INFORMATION

Employer / Business Name		Employer/Business Address		Nature of Business	
Type of Employment	Employment Status		Rank	Position and Monthly Salary	
SSS / GSIS Number			Tax Identification Number (TIN)		
Date of Hire	Length of Service		Office Phone Number	Office Email Address	
Immediate Supervisor / HR Contact Person			Previous Employer	Position	

SPOUSE AND FAMILY INFORMATION

First Name		Middle Name		Last Name	
Employer/Business Name		Employer Business Address		Position and Salary	
Mobile Number	Office Phone Number		Email Address	Facebook Account	
Are there other family member/ relatives who are members of STVPMPC?		No	Yes. Please provide name and relationship.		

EXPENDITURES QUESTIONNAIRE

EXPENSES:		INCOME:
Household Expenses:	School Expenses	Monthly Income
a. Food	a. Tuition Fee	Other Income
b. Gasul	b. Allowance	<i>Please specify</i>
c. Electric Bill	c. Others	
d. Water Bill		Remittance
e. Telephone Bill	TOTAL	
f. House Amortization	Member's Daily Allowance	TOTAL INCOME
g. Cable/Internet	a. Transportation	
h. Medical	b. Food	
i. Insurance	c. Others	
j. Credit Card	TOTAL	NETCASH
k. Other Payables	TOTAL EXPENSES:	
TOTAL		

MEMBERSHIP SUBSCRIPTION AGREEMENT

In connection with my membership to STVPMPC, I hereby subscribe _____ Common/Preferred shares valued at One Hundred Pesos (Php 100.00) per share or equivalent to _____ Pesos on the following terms and conditions:

1. I agree to pay the initial amount of at least One Thousand Pesos (Php1,000.00) upon subscribing and the balance payable in monthly instalment of _____ pesos until the whole subscription is fully paid. I agree that the unpaid balance of my subscribed capital is my liability to STVPMPC.
2. I agree that I could make claims to my total share capital contribution upon termination of membership without pending obligation and subject to STVPMPC's applicable policies, systems and procedures.
3. I agree that in case of default in payment of loans, STVPMPC will have the right to terminate / offset my share capital after 3 months of loan maturity as payment to existing loan balance.

IN WITNESS WHEREOF, I have hereunto set my hand on this ____ day of _____, 20__ at _____, Philippines

CERTIFIED TRUE AND CORRECT:

Signature Over Printed Name

CHARACTER INVESTIGATION

THIS PORTION TO BE FILLED-UP BY STVPMPC MEMBERSHIP COMMITTEE

Evaluated By: _____ Date of Evaluation: _____

Recommendation: _____

This application for membership () Associate () Regular was approved / disapproved by the Board of Director in this meeting held on _____

BOD Resolution No.: _____.

REQUIREMENTS FOR MEMBERSHIP

Payment of fees:

	Membership Fee (Inclusive of ID & passbook)	Php	250.00
Completely filled-up Membership Application Form	Damayan Fund (ages 18 to 59 years old)		350.00
	Share Capital (initial requirement)		100.00
	<i>*Minimum of P 1,000.00 to be considered FULL MEMBER</i>		
Photocopy of Valid ID	Savings Deposit (initial requirement)		100.00
	<i>*Minimum of P 1,000.00 to earn interest</i>		
	TOTAL	Php	800.00