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RBC Yonge and Grenville Branch
468 Yonge Street
Toronto, ON M4Y 1X3

Student Line of Credit

Please complete this confidential form and Email anna.davidzon@rbc.com or fax to 416 974 7760.
Any questions about this form? Email anna.davidzon@rbc.com

*- Required Information

Your Personal Information

*Prefix: [] Dr. [] Prof. [] Mr. [] Mrs. [] Ms. [] Miss *Gender: [] Male [] Female
* Status: [] Married [] Single [] Divorced [] Separated [] Common-law
*First Name: _____ *Home Phone: (____) _____
Middle Name: _____ *Work Phone: (____) _____
*Last Name: _____ *S.I.N.: _____
* Date of Birth: ____/____/____ * Email Address: _____
(month/day/year)

Your Home Address & Residency (minimum of 2 years history required)

*Address: _____ * City: _____ *Province: _____ *Postal Code: _____
*Country: _____ Own: [] Rent: [] \$ _____ * Number of years/months _____
*Previous Address: _____ *City: _____ *Province: _____ *Postal Code: _____
(if current less than 2 years) * Number of years/months _____ *Country: _____
*Country of Residence - (if not a Canadian residence): _____

Employment Information

* Current Employer: _____ *Annual Income: _____ *Number of Years: _____ * Occupation: _____
* Previous Employer _____ *Annual Income: _____ *Number of Years: _____ * Occupation: _____
(if less than 3 years)

Financial Information (if assets are jointly owned, please indicate below)

Table with 7 columns: Assets, Financial Institution, \$ Value, Liabilities, Lender, Balance, Monthly Payment. Rows include Cash in Bank, RRSP, Investments, Principal Residence, Vehicle Owned, Bank Loan, Credit Card(s), Existing Mortgage, Car Loan/Lease, Credit line, Limit.

Your Identification

For security reasons, we require at least two pieces of current identification to open a new account. (Health Card is not accepted in Ontario)

Identification Piece #1:

* Type: _____

* Number: _____

* Place of Issue: _____ Expire Date: _____
DD/MM/YYYY

Identification Piece #2:

* Type: _____

* Number: _____

* Place of Issue: _____ *Expiry Date: _____
DD/MM/YYYY

Bank use only: (ensure client has signed 524- client agreement)

Verified by: _____
RBC Employee Name (Printed)

RBC Employee Signature

Your Credit History

A credit bureau inquiry will be completed in order to allow us to provide the best financial advice possible to you and provide you with maximum daily access limits and credit facilities. Do you consent to the above credit bureau inquiry?



Yes, I agree to a credit bureau inquiry in order to provide me with the most flexible service options.



No, I do not agree to a credit bureau inquiry.

I understand that by selecting no, while RBC can accommodate my choice not to have my credit information accessed in order to open an account, RBC will still be confirming and verifying my identity. This verification inquiry is different from a Credit Bureau inquiry; however, it will still show on the Credit Bureau that an inquiry was taken.

By selecting "Continue", I agree to the selections made above and the other terms of this application and wish to continue with this application.

Signature

Date

Additional Information – if applying for a personal banking account

1. Would you like this to be a joint account? Yes No

If answered yes, then please complete a separate application for this individual.

2. Will this account be used by or on behalf of a third party who is not registered on the account? Yes No

If yes, please provide: Third Party's Name: _____

Third Party's Address: _____

Third Party's Date of Birth: _____
Day / Month / Year

Third Party's Business/Occupation: _____

Relationship to Account Holder: _____

Thank you for choosing RBC Royal Bank. Our goal is to make your banking experience *Personalized, Easy, Pre-arranged and Seamless.*