



FOLLOW THESE 3 EASY STEPS

Step 1

Complete the application and signature card. Check the box(es) of the account(s) you would like to apply for. You must be 18 or older to qualify for Checking Plus® (variable rate)¹ overdraft protection.*

Checking Plus overdraft protection is a line of credit that protects you from overdrawing your checking account up to the available amount of your credit line.**

* You must be 18 to open a Checking Plus account.

**Subject to credit approval.

Step 2

Mail your completed application with photocopies of two pieces of ID, your signed signature card and your opening deposit, to:

Citibank New Account Processing
100 Citibank Drive
San Antonio, Texas 78245

- Make check payable to yourself.
- Write "for deposit only" on the back.
- Sign the back of the check.

Step 3

Once approved, your checks and ATM card with a preset Personal ID Number (PIN) will be mailed to you in 7-10 business days.

FOR NON-RESIDENT ALIEN APPLICANTS

If you are a non-resident alien, please apply in person with a Citibank representative at your nearest Citibank financial center. Be sure to sign the W-8BEN form in addition to the application.

IMPORTANT

Please fill in mother's maiden name and first school attended for identification purposes only. For your protection keep all such information, including your social security number, account numbers and PIN codes, secure and private.

Fill in both your permanent home address and current mailing address, whenever available.

ACCOUNT INFORMATION

How would you like to apply?

Promotion code: _____

Individual Account, and I understand that if I am applying for Checking Plus, I am applying for individual credit in my own name.

Joint Account, and I understand that if we are applying for Checking Plus, we are applying for joint credit, relying on our joint income and assets.

What account(s) would you like to apply for?

Checking

Initial Deposit \$ _____

Checking Plus® Overdraft Protection

Line amount requested (minimum \$500 to \$25,000):
\$ _____

Do you: Rent Own Live on Campus/Other

What is your monthly housing payment?
(Rent amount or mortgage payment—include maintenance, taxes/insurance.) _____

Savings

Day-to-Day Savings Initial Deposit \$ _____

Money Market Account Initial Deposit \$ _____

Citibank® Debit MasterCard®

Your checking account comes with a Citibank® Debit MasterCard®. You can choose to enroll in ThankYouSM Network or for an annual fee you can choose the Citibank® / AAdvantage® Debit Card.

Do you want a Citibank® Debit MasterCard® with ThankYouSM Network? Yes No

- You get 1 point for every \$2 you spend when you select "Credit" at the cashier. When you select "Credit", you authorize the purchase by providing your signature.
- You get 1 point for every \$3 you spend when you select "Debit" at the cashier. When you select "Debit", you authorize the purchase by entering your PIN (which is the code you enter at ATMs).

Do you want a Citibank® / AAdvantage® Debit Card? Yes No

Basic (Get 2,000² bonus American Airlines AAdvantage® miles when you sign up. Then earn 1 mile for every \$2 you spend, up to 60,000 miles each calendar year. Annual Fee: \$25)

Premium (Get 4,000² bonus American Airlines AAdvantage® miles when you sign up. Then earn 1 mile for every \$1 you spend, up to 100,000 miles each calendar year. Annual Fee: \$65)

Apply eligible AAdvantage® miles³ to an existing AAdvantage account: _____
(account number)

Do you have an existing Citibank account? Yes No

If "yes", enter your Citibank Banking Card #: _____

APPLICANT INFORMATION

Name First Middle Last			Birthdate mm / dd / yyyy			Social Security Number			
Mother's Maiden Name			First School Attended			Country of Citizenship			
Permanent Home Address or Parent's Address (P.O. Box not allowed)			City		State/ Province	Zip/ Postal Zone		Country	
Current Address Address Since		Previous Address If Less Than 2 Years At Current Address		Previous Address Address Since					
Is the permanent home address the same as your current mailing address? <input type="checkbox"/> Yes <input type="checkbox"/> No			If "no" please give current: Address			City		State	Zip
Current Phone Number			Phone Listed In The Name Of			Cell Phone Number		Email Address	
What University/College are you currently affiliated with?			What U.S. City And State Is Your University/College Located In?			What Is Your Current Status? <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate student			

(1) Enrollment eligibility, qualifying accounts and services, and point accrual and redemption are subject to Citibank Program ThankYou Network Terms and Conditions; other terms and conditions apply. Customer must be citizen or resident alien of the United States (U.S.) with a valid U.S. taxpayer identification number. Taxes, if any, are the customer's responsibility. Accordingly, Citibank recommends that the customer consult their tax advisor. No fees for account enrollment or participation in ThankYou Network; regular account charges apply. ThankYou membership and ThankYou Point redemption are limited to the primary (first) checking account signer as established by Citibank. Points for debit card purchases are subject to qualifications in terms and conditions and will be rounded down to the nearest whole dollar on a transaction-by-transaction basis. (2) Bonus miles are awarded to account holder within 90 days of enrollment in the Citibank® / AAdvantage® Debit Card. (3) The maximum number of AAdvantage® miles you can earn per calendar year is 60,000 AAdvantage® miles for the Basic Citibank® / AAdvantage® Debit card and 100,000 AAdvantage® miles for the Premium Citibank® / AAdvantage® Debit card. AAdvantage Executive Platinum®, AAdvantage Platinum® and AAdvantage Gold® members are excluded from these limits. AAdvantage® miles can be earned on signature-based purchases, internet purchases, purchases made over the phone or through the mail and POS purchases when "credit" is selected. Earned AAdvantage® miles will appear on your Citibank periodic statement upon transaction settlement and posted to your AAdvantage® account within 45 days of the date on the periodic checking account statement. AAdvantage® miles earned from transactions authorized during one statement cycle and settled in the following statement cycle will appear the following statement cycle. Citibank reserves the right to terminate, change or modify the conditions under which AAdvantage® miles are earned. Fees apply. American Airlines reserves the right to change AAdvantage® program rules, regulations, travel awards and special offers at any time without notice and to end the AAdvantage® program with six months notice. Any such changes may affect your ability to use the mileage awards or credits that you have accumulated. Members may not be able to obtain all offered awards at all times or use awards for all destinations or on all flights. AAdvantage® travel awards, mileage accrual and special offers are subject to government regulations. American Airlines is not responsible for products or services offered by other participating companies. For complete details about the AAdvantage® program, visit www.aa.com/aaadvantage. American Airlines, AAdvantage and AAdvantage with Scissor Eagle Design are registered trademarks of American Airlines, Inc.



IDENTIFICATION (Please provide two of the forms of identification listed below and a copy of each)			
Driver's License or State ID #	Issue Date ____/____/____ mm dd yyyy	Expiration Date ____/____/____ mm dd yyyy	
Passport #	Country	Expiration Date ____/____/____ mm dd yyyy	
Military ID #	Expiration Date ____/____/____ mm dd yyyy	School ID # Alien Registration Card #	
Major Bank/Credit Card <input type="checkbox"/> American Express <input type="checkbox"/> Diners Club <input type="checkbox"/> Discover <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	Account No. #	Expiration Date ____/____/____ mm dd yyyy	

CO-APPLICANT/JOINT INFORMATION			
Name First Middle Last	Birthdate ____/____/____ mm dd yyyy	Social Security Number	
Mother's Maiden Name	First School Attended	<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Non-Permanent Resident Alien <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien Country of Citizenship	
Permanent Home Address or Parent's Address (P.O. Box not allowed)	City	State/Province	Zip/Postal Zone Country
Is the permanent home address the same as your current mailing address? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "no" please give current: Address	City	State Zip
Current Phone Number	Phone Listed In The Name Of	Cell Phone Number	Email Address

CO-APPLICANT IDENTIFICATION (Please provide two of the forms of identification listed below and a copy of each)			
Driver's License or State ID #	Issue Date ____/____/____ mm dd yyyy	Expiration Date ____/____/____ mm dd yyyy	
Passport #	Country	Expiration Date ____/____/____ mm dd yyyy	
Military ID #	Expiration Date ____/____/____ mm dd yyyy	School ID # Alien Registration Card #	
Major Bank/Credit Card <input type="checkbox"/> American Express <input type="checkbox"/> Diners Club <input type="checkbox"/> Discover <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	Account No. #	Expiration Date ____/____/____ mm dd yyyy	

TERMS FOR CONSUMER ACCOUNTS

By signing the reverse side of this card, I authorize Citibank ("you") to accept instructions from me to open/close accounts, apply for credit and request services, without my further original signature. You may accept my oral or electronic instructions with the same effect as if I had signed them. I agree to follow your security procedures and to provide my signature upon request. You may at any time refuse to accept such instructions. I authorize you to record and monitor my telephone calls as evidence of my instructions and for service quality purposes. In addition, I authorize you to obtain a consumer report in connection with the application, opening, update or renewal of any loan or deposit account I apply for or open and I understand that you may obtain such reports. I also authorize you to use these consumer reports to consider me for other programs with Citibank. Upon request, you will inform me if a consumer report has been obtained and will give me the name and address of the agency furnishing the report.

NON RESIDENT ALIEN TAX CERTIFICATION NOTICE (If joint account holders, each must provide a separate tax certification)

Foreign persons who receive certain types of U.S. income must provide IRS Form W-8BEN (Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding) or a substitute Form W-8BEN to: (1) Establish that you are a foreign person; (2) Claim that you are the beneficial owner of the income for which Form W-8BEN is being provided; and (3) If applicable, claim a reduced rate of, or exemption from, withholding as a resident of a foreign country with which the United States has an income tax treaty. Form W-8BEN should be used for Foreign Estates and Foreign Complex Trusts. Form W-8IMY should be used for Foreign Grantor Trusts, Foreign Simple Trusts and Foreign Partnerships. Also, Foreign Partnerships may, in limited instances, give a Form W-8ECI.

- If you are a Foreign Person (individual), initial here _____ and complete IRS Form W-8BEN or substitute Form W-8BEN.
NOTE: If one owner of the account(s) is a U.S. Person, that person's name and SSN will be used for U.S. Tax Reporting and withholding (if applicable) purposes.

FOR BANK USE ONLY	
For each signer who is not a U.S. citizen you must note his/her response when asked if they are a public figure or a related individual: Check the box that applies to each signer (indicate yes or no for each) and place your initials to the right.	
Signer 1: <input type="checkbox"/> Yes <input type="checkbox"/> No	Signer 2: <input type="checkbox"/> Yes <input type="checkbox"/> No Signer 3: <input type="checkbox"/> Yes <input type="checkbox"/> No Signer 4: <input type="checkbox"/> Yes <input type="checkbox"/> No Associate's Initials _____

DATE:

CITIBANK ACCOUNT Page 3



Account Title: _____

Check appropriate box: Individual Joint UTMA Trust Estate Other _____ Exempt from backup withholding

Address: _____

Account Number(s): _____

SIGNER	TAX ID NUMBER	ISSUE/LINK TO CITIBANK® BANKING CARD
1		
2		
3		
4		

Citibank is allowed by law to share with its affiliates any information about its transactions or experiences with you. Unless permitted by law, Citibank will not share among its affiliates other information about you that Citibank gets at any time from you or from third parties (for example, credit bureaus), if you check:

Signer 1 Signer 2 Signer 3 Signer 4.

By signing below, I: (1) certify my tax status; (2) accept the terms described on the reverse side; and (3) agree to be bound by any agreement governing any account opened in the title indicated on this card.

TAX CERTIFICATION: Under penalties of perjury, I certify that: (1) The number shown on this form is my correct taxpayer identification number, and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien).

Certification Instruction: You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding

Signature Signer 1	Date	Signature Signer 2	Date
Signature Signer 3	Date	Signature Signer 4	Date

DATE:

CITIBANK ACCOUNT



Account Title: _____

Check appropriate box: Individual Joint UTMA Trust Estate Other _____

Account Number(s): _____ Marketplace: _____

NAME (SIGNER 1) (Please sign within box below)	Date	NAME (SIGNER 2) (Please sign within box below)	Date
_____		_____	
NAME (SIGNER 3) (Please sign within box below)	Date	NAME (SIGNER 4) (Please sign within box below)	Date
_____		_____	

Forward to Signature Verification Unit

➤ DID YOU REMEMBER TO

- **Fill out the entire application?**
- **Sign the signature card?**
- **Send in photocopies of your two pieces of ID?**
- **Include your opening deposit check?**

**For additional information visit us online at
www.students.citibank.com**

**or call
1-800-627-3999**

IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT AT CITIGROUP

To help the United States Government fight terrorism and money laundering, Federal law requires us to obtain, verify, and record information that identifies each person that opens an account. What this means for you: when you open an account, we will ask for your name, a street address, date of birth, and an identification number, such as a Social Security number, that Federal law requires us to obtain. We may also ask to see your driver's license or other identifying documents that will allow us to identify you. We appreciate your cooperation.

All applications for all accounts are subject to approval. Accounts are only available to registered campus members. Must be 18 years or older to qualify for credit. For terms and conditions related to access to products and services of Citibank, Citibank affiliates or third parties, go to links located at www.students.citibank.com

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