



Wilkinson County Christian Academy

To All Parents of WCCA:

United Mississippi Bank (UMB) is providing the school tuition for the 2022/2023 school year. The rate on tuition loans is 3.25%. No credit check is required.

Your monthly payment will be automatically drafted from your checking account whether your account is with UMB or other financial institution.

For the school year 2022/2023 the following has been authorized:

- All twelve (12) month loans must be closed on or before April 30, 2022 and must mature by April 30, 2023.
- All other loans must be closed before the student is allowed to start WCCA and must mature no later than April 30, 2022.

You will need to have this tuition financing packet to begin the tuition loan process. Once you have the proper documentation, you will need to complete and sign the application. You will then need to take the application, your WCCA tuition statement, two (2) forms of government issued ID, and a voided check to UMB- Woodville branch location.

You may mail all of the above required documents to the P.O. Box 977 Woodville MS 39669, or fax them to 601-888-3588. However, you will have to go to the bank and sign the loan.

Please allow 48 hours for your loans to be processed, UMB will notify parent when their loan is ready to be signed.

If you should have any questions in regards to your school tuition loan, you should contact Malarie Honea at 601-888-7667 or Malcom Burkes at 601-888-7670.

WCCA will be posting office hours via Facebook and our texting system. If you have not signed up for our texting system please go to www.wccarams.org and select the student life tab; scroll down to the text messaging notifications to sign up.

Sincerely,

Randy Holloway

**UNITED MISSISSIPPI BANK / WCCA School Loan Program
2022-2023 Credit Application**

If this is an application for joint credit, please initial below:

Applicant

Joint Applicant

Applicant

Name _____ Date of Birth _____

Address _____ S.S.# _____

City _____ State _____ Zip _____

Employer & Occupation _____

Phone _____ E-mail _____

Applicant Signature

Date

Joint Applicant (if applicable)

Name _____ Date of Birth _____

Address _____ S.S.# _____

City _____ State _____ Zip _____

Employer & Occupation _____

Phone _____ E-mail _____

Applicant Signature

Date

Date of Application _____ Amount \$ _____

FOR UMB USE ONLY: Rate: 3.25%

CIP Identification for Primary Applicant: OFAC: _____ NAICS Code: _____

1. D/L No _____ Issue date _____ Exp. date _____ by: _____

2. (ss card, insurance card, passport, firearms license) _____

CIP Identification for Joint Applicant: OFAC: _____ NAICS Code: _____

1. D/L No _____ Issue date _____ Exp. date _____ by: _____

2. (ss card, insurance card, passport, firearms license) _____

**CONSUMER AUTHORIZATION FOR DIRECT PAYMENT VIA
ACH (ACH DEBIT)**

Direct payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment

I (we) hereby authorize United Mississippi Bank, hereinafter called "Company", to electronically debit my (our) account (and, if necessary, electronically credit my (our) account to correct erroneous debits) as followed at the depository financial institution named below ("Depository"). I (we) agree that the ACH transactions I (we) authorize comply with all applicable law.

Depository Name	Branch	
Address	City/State	Zip
Routing and Transit Number	Account Number	
DEBIT ACCOUNT TYPE (Checking) _____ (Savings) _____		
CREDIT LOAN ACCOUNT \$ _____		
Loan Number	Payment Amount	Next Due Date
		Maturity Date

I (we) understand that this authorization will remain in full force and effect until Company has received written notification that I (we) wish to revoke this authorization. I (we) understand that Company requires written notice at least three (3) days notice prior to the effective date in order to cancel this authorization. Written notice will be accepted by mail at the address above or in person at Company. It is further agreed that should an electronically initiated debit entry be returned for insufficient funds, account closed, authorization revoked or payment stopped, Company will reverse loan credit, and this authorization will no longer be in force and effect. If Company does not hold the consumer's account, the undersigned personally and as, or on behalf of, the account owner (s) acknowledge receipt of the Company's Electronic Funds Transfer Disclosure.

Applicant Signature	Printed Name
Date	

Applicant Signature	Printed Name
Date	

Received By	Entered By
Date	Date