

Account application

Fields marked with an asterisk (*) are required.

1. IDENTIFICATION

First name*: Last name*:

Sex*: Male Female Date of birth*: / /

Language*: French English Portuguese

2. CURRENT HOME ADDRESS

Street number and name*: Unit/apt:

City*: Province/state:

Country*: Postal code:

Additional information:

3. MAILING ADDRESS

Same as home address. If not, complete the following spaces.* Yes No

Street number and name*: Unit/apt:

City*: Province/state:

Country*: Postal code:

Additional information:

4. CONTACT INFORMATION

Mailing address*:

Telephone: Type: N° complet:

Best days to reach me: Monday Tuesday Wednesday Thursday Friday

Best time to reach me (local hour): Morning Afternoon Evening

Please send your request to martine.v.beaupre@desjardins.com
and to monique.n.jung@desjardins.com

Fields marked with an asterisk (*) are required.

5. FORMS OF ID

you must bring the identity documents described below when you meet the Desjardins advisor to finalize the opening of the account.

5.1 PASSEPORT

Number*: Expiry date*: / /

Country of citizenship (issuing country)*:

5.2 ADDITIONEL FORME OF ID

Any valid official immigration document issued by the Government of Canada or Québec.

Type*: Number*:

Place of issue*: Expiry date*: / /

6. JOB IN CANADA (IF KNOWN)

Employer:

Position:

Scheduled start date: /

EMPLOYER ADDRESS

Street number and name: Unit/apt:

City: Province/state:

Telephone:

7. YOUR EXPECTED ARRIVAL DATE IN CANADA

we can schedule a meeting so that you'll have access to financial services right away.

Arrival in Canada*: / /

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