

2025 SCHOOL OF BANKING APPLICATION FOR ADMISSION

FEBRUARY 3 – 7 | COURTYARD BY MARRIOTT | COLUMBIA, MISSOURI

IMPORTANT: Please make a copy of this application for your files. It contains information on enrollment fees and the school cancellation policy. Be sure to complete both sides of this application.

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION.

Name: _____

Nickname: (For badge) _____

Title: _____

Bank Name: _____

Bank Street Address: _____

Bank Post Office Box: _____

City/State/ZIP: _____

Business Telephone: _____

Email Address: _____

In case of emergency, contact:

Name: _____

Telephone: _____

Relationship to Student: _____

EXPERIENCE:

Total years of banking experience: _____

Please indicate years of experience in the following areas.

____ Lending	____ Public Relations/Marketing
____ Administration	____ Loan Administration
____ Operations	____ Human Resources
____ Investments	____ Chief Executive Officer
____ Compliance	____ Customer Service
____ Teller	____ Asset/Liability Management
____ Other Please list _____	

Total Assets of Bank:

- ☐ Under \$50 m
- ☐ \$51 – \$250 m
- ☐ \$251 m - \$500 m
- ☐ \$501 m - \$1b
- ☐ Bank Holding Co.

Total Deposits of Bank

- ☐ Under \$50 m
- ☐ \$51 – \$250 m
- ☐ \$251 m - \$500 m
- ☐ \$501 M - \$1b
- ☐ Bank Holding Co.

EDUCATION

Please check the highest level achieved.

<input type="checkbox"/> HIGH SCHOOL	<input type="checkbox"/> SOME COLLEGE
<input type="checkbox"/> ASSOCIATE DEGREE	<input type="checkbox"/> BACHELOR'S DEGREE– Other
<input type="checkbox"/> BACHELOR'S DEGREE – Business Administration	<input type="checkbox"/> MASTER'S DEGREE – Other
<input type="checkbox"/> MASTER'S DEGREE – Business	

Banking schools attended:

- 1 Missouri School of Lending – Year _____
- 2 Other Banking Schools Please indicate: _____

APPLICANT PLEASE READ & SIGN

I have read the accompanying brochure explaining the school requirements, as well as the cancellation/refund policy. I agree to abide by all the requirements for participation associated with this school.

Applicant's
Signature _____ Date _____

NOMINATING OFFICER PLEASE READ & SIGN

The bank has approved the submission of this application. I verify the accuracy of the application. (Application must be signed by the bank CEO or president, department head or other executive officer duly authorized by the bank.)

Nominating Officer(*print*) _____

Title: _____

Signature: _____

Date: _____



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TUITION FEES

Please check the appropriate box. Tuition is per year, per student.
Second year tuition may differ.

Member ☐ \$2,150 Nonmember ☐ \$6,450

☐ Check enclosed, payable to **Missouri Bankers Association**

☐ Invoice the bank.

☐ Credit Card Payment

Please Type or Print

Card No. _____

Exp. Date _____ CVV _____

Type or Print Name _____

Signature _____

Cancellations and Refunds

If you must cancel your registration, please note the following dates and fees. Because of the high cost of preparing school materials, these dates are strictly adhered to.

Full Refund.....On or before January 20, 2025

\$150 Cancellation Fee.....January 21 - 27, 2025

No Refundsafter January 28, 2025

APPLICATIONS

Please complete the enclosed application to register for the Missouri School of Banking. Return this form by:

By mail to:

Missouri Bankers Association

ATTN: School Registrar

PO Box 57

Jefferson City, MO 65102

Or email signed application to:

Cheri Messerli — cmesserli@mobankers.com

We are unable to accept online or phone registrations because of the verification of the prerequisites. Applications must be signed by the student's supervisor or CEO.

