Name: Class:

S BUILDING BLOCKS STUDENT WORKSHEET

Opening a savings account

A savings account is an account at a bank or credit union that you can use to deposit money, earn interest, and save up for something you want.

When you're ready to open a savings account, it's helpful to know what information you'll need and how to fill out an application.

Instructions

- 1 Review the four items listed below that you may need to open a savings account.
- 2 Review the types of identification pictured and check the ones you have.
- 3 Answer the reflection questions on the next page.
- 4 Fill out the savings account application. Be sure to fill out the account holder information.

What you'll need to open an account

To open a savings account, a bank or credit union will likely require you to have the following:

- A form of picture identification from the federal or state government or from a foreign government (such as a driver's license or passport)
- A second form of identification (such as your Social Security card, your birth certificate, a bill with your name and address on it)
- A Social Security number or an Individual Taxpayer Identification Number (ITIN)
- Money to open the account



Birth certificate

Government-issued photo ID (such as a non-driver identification card issued by a state)

Passport

Passport

Reflection questions

1. Why is having a savings account a good idea?

Check the type(s) of identification that you might have.

2. As a middle school student, you probably won't be able to open a savings account on your own. Is there an adult you could ask to be on the account with you? Describe why this person would be a good banking partner.

Sample application for a savings account

Please leave fields blank for items you don't have	or don't kno	ow about.		
Applying for Checking or Savings accou	unt			
PERSONAL INFORMATION				
First name:		MI:	Last:	
Street address:				
City:		State:	Zip code:	
How long have you been at this residence?				
Date of birth:		Social Security number:		
Driver's license number:		Issued by:	Expiration:	
Additional form of identification:				
CONTACT INFORMATION				
Primary phone number: Cell phone		ne number:		
Email:				
Employment status Employed Unemplo	oyed	Retired		
PLACE OF EMPLOYMENT				
Name of business:		Telephone number:		
Street address:				
City:	St	tate:	Zip code:	
How long have you worked at this business?				

Additional account holder? Yes No If yes, complete this information:					
PERSONAL INFORMATION					
First name:		MI:	Last:		
Street address:					
City:		State:	Zip code:		
How long have you been at this residence?		1			
Date of birth:		Social Security number:			
Driver's license number:		Issued by:	Expiration:		
Additional form of identification:					
CONTACT INFORMATION					
Primary phone number:	umber:				
Employment status Employed Unemployed Retired PLACE OF EMPLOYMENT					
Name of business:		Telephone number:			
Street address:					
City:	St	ate:	Zip code:		
How long have you worked at this business?					
I certify that all of the above information is true and complete to the best of my knowledge.					
Signature: Date:					