



# Director Application and Agreement to Serve

Applicant Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number Home/Cell \_\_\_\_\_ Business \_\_\_\_\_

Email Address \_\_\_\_\_

Current Employer \_\_\_\_\_ Position \_\_\_\_\_

Type of Business \_\_\_\_\_ Date of Employment \_\_\_\_\_

List any positions, directorates, or offices held in the past five (5) years:

Dates	Position	Organization

Education: High School Graduate: YES NO College Graduate: YES NO Degree: \_\_\_\_\_

School and Major Field of Study \_\_\_\_\_

List any relevant training or educational accomplishments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any membership(s) in professional societies and/or organizations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all financial institutions in which you have been or are currently an official, employee, director, or committee member. Include dates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following questions address the minimum qualification requirements of NCUA Regulation 713

	YES	NO
Have you ever been denied fidelity bond coverage, had bond coverage canceled or revoked, or been notified that you are not eligible to obtain bond coverage?		
Have you ever had a judgment issued against you in a civil action based upon grounds of fraud, deceit, or misrepresentation?		
Have you ever caused this credit union to suffer a financial loss?		
Have you ever been removed from office by any regulatory or governmental agency while acting as an officer, agent, employee, consultant, or representative of any financial institution?		
Have you ever been personally subject to an operating directive for cause while serving as an officer, agent, employee, consultant, or representative of any financial institution?		
Have you ever caused or participated in an activity that resulted in the suspension or revocation of a financial institution's certificate of incorporation, or authority or license to do business?		
Have you ever been convicted of any criminal offense involving dishonesty or breach of trust?		
Are there any legal or administrative proceedings pending against you?		

If you answered YES to any of the preceding questions, please attach a separate sheet of paper providing additional information regarding the circumstances.

**To facilitate the process of obtaining a background check, please provide the following information:**

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Any other names you have used: \_\_\_\_\_

All addresses used within the past five (5) years \_\_\_\_\_

**CERTIFICATION AND AGREEMENT TO SERVE**

I certify that the information provided on this form is true and correct. If elected or appointed to office, I pledge to carry out my duties and responsibilities commensurate with said office(s) as promulgated by the Regulations of the NCUA and the bylaws of this credit union. I authorize the credit union to obtain a credit report and other information necessary to complete a background check.

Signature \_\_\_\_\_

Date \_\_\_\_\_