



***REQUEST FOR NOMINATION FORM**

BOARD OF DIRECTORS

SUPERVISORY COMMITTEE

Full Name _____
Last First Middle Initial

Residence Address _____

Telephone Number _____
Home Work Cell

Credit Union Membership Number _____

Current Employer _____
Position _____
Primary Duties _____

***Former employees of Arapahoe Credit Union are eligible to apply for nomination to the Board of Directors or Supervisory Committee after completing a five year waiting period starting from the date of termination of employment.**

Education _____

**Professional Licenses
Or Certifications** _____

Other Qualifications _____

**Positions held with
Other Credit Unions,** _____

Organizations, or _____
Public Office _____

The following information must be completed – NOTICE: This information will be safeguarded and remain confidential.

Have you ever filed for protection under any bankruptcy laws? If yes, give details:

Are you now or have you been a party to any lawsuits? If yes, give details:



**If elected, you will agree to complete mandatory training as assigned, and be available for possible travel to credit union conferences as assigned.
All training and travel expenses will be paid for by Arapahoe Credit Union.**

**If elected, you will consent to a background check and credit bureau report check.
Please sign below indicating your approval and agreement.**

Signature

Date