



**NOMINATION FORM**

**PLEASE COMPLETE APPLICATION FORM IN BLOCK LETTERS**

**CANDIDATE PARTICULARS: (Resume must be attached to this form.)**

Full Name: \_\_\_\_\_

Account No. \_\_\_\_\_ Date Joined: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone (Cell) #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (DD/MM/YYYY) Profession/Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer's Address: \_\_\_\_\_

**Educational Background:**

Primary \_\_\_\_\_

Secondary \_\_\_\_\_

Tertiary \_\_\_\_\_

Credit Union and other Co-operative experience: \_\_\_\_\_

Present position held: \_\_\_\_\_

Other position (s) held: \_\_\_\_\_

Other Skills/Experiences \_\_\_\_\_

**DECLARATION**

I \_\_\_\_\_ agree to be a nominated person and if elected, to serve faithfully as a member of the Board of Directors / Credit / Supervisory Committee. I hereby declare that if voted in I will be bound by all the applicable policies of the Society.

I confirm that all information given herein is true and correct and if any information is deemed to be inaccurate, my selection will be null, and void and I will no longer be eligible to serve.

\_\_\_\_\_  
**SIGNATURE OF NOMINEE**

\_\_\_\_\_  
**DATE**

**NOMINATION**

I hereby nominate Mr./Mrs./Miss (tick  one) \_\_\_\_\_ and declare that he/she is a fit and proper person for election to the following:

PLEASE TICK  ONE (1) COMMITTEE ONLY

ELECTION TO THE BOARD OF DIRECTORS (for a period of Three (3) years)

ELECTION TO THE CREDIT COMMITTEE (for a period of One (1) year)

ELECTION TO THE SUPERVISORY COMMITTEE (for a period of One (1) year)

\_\_\_\_\_  
NOMINATOR – PRINT NAME

\_\_\_\_\_  
NOMINATOR – PRINT NAME

\_\_\_\_\_  
NOMINATOR – SIGNATURE

\_\_\_\_\_  
NOMINATOR – SIGNATURE

DATE: \_\_\_\_\_ A/C# \_\_\_\_\_

DATE \_\_\_\_\_ A/C NO. \_\_\_\_\_

