



MEMBER NUMBER

Empty rectangular box for member number

VOLUNTEER APPLICATION

Name _____ Maiden Name (if different) _____

Address _____
Street City State Zip

Home Phone _____ Work Phone _____

Place of Birth _____ Date of Birth _____

Employer _____ Social Security Number _____

Type of Business _____

Number of years with present employer _____ Your position or job title _____

List memberships in professional societies and associations, volunteer positions, directorates or offices held for the past ten (10) years: (use separate sheet if necessary)

Date Organization Name and Address Title

Four horizontal lines for listing memberships

List professional work experience for at least the previous 10 years: (use separate sheet if necessary)

Date Employed Organization Name and Address Title

Three horizontal lines for listing professional work experience

Educational background (circle highest grade completed)

1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 () Major Field of Study _____
Grade and High School College

Other training or experience _____

Three horizontal lines for other training or experience

Position applying for: Board of Directors Supervisory Committee

Are you willing to accept a position if elected or appointed and to remain in office until such time as a qualified successor is found? Yes No

Estimated number of hours per month you will be able to donate as a volunteer _____

My reasons for wanting to serve as a volunteer official are: _____

List any financial institutions in which you control directly or indirectly or own legally or beneficially 10% or more of the outstanding stock (in voting power): _____

IF ANY OF THE FOLLOWING QUESTIONS ARE ANSWERED YES, PLEASE PROVIDE DETAILS ON A SEPARATE SHEET AND ATATCH TO THIS APPLICATION.

Have you ever been denied an individual or position schedule fidelity bond, or had a bond cancelled or revoked? Yes No

Have you ever been refused a professional, occupational or vocational license by any public or governmental licensing agency or regulatory authority, or has any such license held by you ever been suspended or revoked? Yes No

Has the certificate of incorporation or authority of license to do business in any state or federally chartered credit union, saving and loan association, bank or other financial institution of which you were an officer, director or key management person ever been suspended or revoked? Yes No

Are you currently involved, in any capacity, with any financial institution, check cashier, lending agency, collection agency, or other financial services provider? Yes No

Are you currently involved, in any capacity, with any trade organization? Yes No

Have you ever been requested, advised, ordered or told by any regulatory authority or government agency to:

A. Divest any stock ownership or other ownership interest you currently have or have had in any financial institution? Yes No

B. Leave or resign as an officer, director, agent, employee, consultant or representative of any credit union, savings and loan association, bank or other financial institution? Yes No

Are you related by blood or marriage to any employee of this credit union or a Board or Committee member now seated? Yes No

Are you currently employed by Arkansas Federal Credit Union or have you worked for Arkansas Federal Credit Union in the previous 5 years? Yes No

Have you ever been convicted of a criminal offense involving dishonesty or breach of trust? Yes No

Have you ever been adjudged a bankrupt? Yes No

CRIMINAL OFFENSE:

Name of offense: _____

Date of occurrence _____ Date of conviction _____

Sentence conferred _____

To facilitate the process of obtaining a credit union background check, please provide the following:

1. Any other names which you have used _____

2. Previous address, (if your address changed over the past 2 years) _____

3. Name of spouse _____

4. Spouse Social Security Number _____

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

If I am elected or appointed to serve as a Volunteer Official on the Board of Directors or Supervisory Committee of Arkansas Federal Credit Union, I agree to conform to and abide by the following:

1. Attend all regular and special meetings when notified unless prevented in attending by circumstances beyond my control.
2. Seek to learn more about the credit union movement, Arkansas Federal Credit Union and its services and about my individual responsibilities by completing the Core and Required modules of the Volunteer Training Program within 12 months of my initial election or appointment as a Volunteer Official.
3. Attend one credit union Conference/School each year.
4. Consider the business of the credit union and its members to be confidential in nature and not to discuss such business inappropriately.
5. Should I ever find myself under obligation to any other group or organization that is in conflict with the credit union, I shall disclose the conflict to the Board Chairman and refrain from voting or acting on issues related to the conflict.
6. Participate to the best of my ability in determination of policy and other matters. Give full attention to problems of the credit union, and vote on issues submitted or proposed for action.
7. Give all assistance possible to my fellow Volunteer Officials and Management of the credit union.
8. Keep personality conflicts to myself and out of credit union business.
9. Reimburse the credit union for any expenses incurred on my behalf for the attendance of conference, educational seminars, dinners and any other function that I fail to attend without giving sufficient cancellation notice or just cause.

I fully understand that failure to fulfill the duties and responsibilities of the Board of Directors/Supervisory Committee under the terms of this agreement, the Federal Credit Union Act and the National Credit Union Administration Rules and Regulations may cause my dismissal as a Volunteer Official. I acknowledge that failure to complete the educational requirements, while serving my term, will cause me to be ineligible for nomination as an incumbent for credit union elections.

I certify also that I have a positive net worth and am current on all outstanding obligations. The credit union is hereby authorized to obtain a commercial report on my credit history and seek whatever information is necessary for completing a background check.

Signature

Date