

APPLICATION FOR VOLUNTEER CANDIDACY

NAME			DAIE			
nomir	urpose of this form is to provide t nating candidates for vacancies o iate of such.					
Please	e fill out the application, giving co	mplete answers to qu	uestions	about yourself.		
I.	Are you a member of Frontway	e Credit Union?	Yes	No		
II.	Check mark the vacancy you wi	ish to apply for:	Board	Supervisory Committee	Associate	
III.	Address:					
	Email address:					
	Phone:(Home)		Office)	(Cell)		
		·	·	(33,		
V	Ollege or University (Name)	gth, etc., of military c	r compa			
VI.	Employment and/or Military Se	ervice History:				
•	loyment/Service History Month/Year om: To:	Employe Company/Mi		Position F If Military, Rar Positio	nk and	

VII.	Community Service/Clubs/Credit Union Participation:				
	Organization Name	Rank of Office Held, if Any			
VIII.	Indicate, in 50 words or less, why you desire to serve as a Front	twave Credit Union volunteer:			
IX.	Please provide a current copy of your Resume.				
	APPLICANT'S CERTIFICATION AND AGE	REEMENT			
candid to con	by certify that the answers given and statements made are trate for the 2022 Election, I will receive an email with instruction duct a background investigation through credit bureaus and oth Union's applicant tracking system.	ns for authorizing Frontwave Credit Union			
APPLIC	CANT'S SIGNATURE DATE				

