

Faith Community United Credit Union (FCUCU) VOLUNTEER INFORMATION FORM

	APPLICATION DATE
POSITION OF INTEREST:	APPLICATION DATE
BOARD OF DIRECTORS	ADVISORY COMMITTEE
FACILITIES COMMITTEE	SUPERVISORY AUDIT COMMITTEE
MARKETING COMMITTEE	ANNUAL MEETING COMMITTEE
OFFICE OR EVENT SUPPORT	OTHER
NAME:	
ADDRESS:	
CITY/STATE/ZIP:	
HOME PHONE:	
EMPLOYED BY:	
WORK ADDRESS:	
CITYSTATE/ZIP:	
WORK PHONE:	
POSITION:	
YEARS EMPLOYED THERE:	
HOW LONG HAVE YOU BEEN A MEMBER OF F	CUCU:
DO YOU BELONG TO ANY OTHER CREDIT UNI	ON:YESNO
POSITION	
IF YES, CREDIT UNION NAME and ADDRESS:_	

EDUCATION:	
CREDIT UNION EXPERIENCE:	
RELEVANT WORK OR VOLUNTEER EXPER	RIENCE (include dates):
SKILLS/INTERESTS/HOBBIES:	
AVAILABILITY (# hours/week; days):	
PLEASE ATTACH YOUR RESUME	
COMPLETE THIS SECTION ONLY IF YOU ARE INTERESTED IN A POSITION ON THE BOARD OF DIRECTORS OR SUPERVISORY AUDIT COMMITTEE	
Candidates must consent to a background check and must be bondable in accordance with the requirements of our insurer.	
SOCIAL SECURITY #:	BIRTHDATE:
DRIVERS LICENSE # (INCLUDE STATE):	
SIGNATURE (consent for background check):	
RETURN COMPLETED FORM TO:	NOMINATING COMMITTEE, Chairperson Faith Community United Credit Union, Inc. 3550 East 93 rd Street Cleveland, Ohio 44105