

Your Best Within Reach

1888 E. Sherman Blvd. | Muskegon, MI 49444 | 231.733.1329 | bestfcu.org

To assist the Nominating Committee in selecting interested and qualified applicants for the Board of Directors, please complete the following items and submit your application for consideration. **Must also include signatures from 100 BFCU Members supporting your application.** Deadline for receipt of applications is no later than 5:00 PM EST, February 28th.

Board applicants must be age 18 or older, have accounts in good standing at BFCU, and be a primary member on at least one account. Applicants may not have an immediate family member (spouse, child, sibling, parent, grandparent, grandchild, stepparent, stepchild, stepsibling, or similar adoptive relationship), who is a paid employee of Best Financial Credit Union. Additional details and information may be provided when the application is received.

Contact Information

First Name: Las	st Name:		
Address:	City:		
State: Zip: Home	Phone:		
Cell Phone: Wo	ork Phone:		
Email Address:			
BFCU Account Numbers			
Please List All BFCU Account Numbers (Primary Member or Associate):			

Employment		
Currently Employed	Retired	
Present Employer:		
Name:		Supervisor:
Address:		
Job Title:		Number of Years:
Responsibilities:		
Previous Employer:		
Name:		Supervisor:
Address:		
Job Title:		Number of Years:
Responsibilities:		
Education		
Universities attended:		

Degrees attained:
List any skills, talents or educational background you feel would be an asset as a Board Member:
Member Questions
Which of BFCU's products & services do you use?
What do you feel are some of the most beneficial products & services offered by BFCU?
What are your thoughts on the credit union movement and the value credit unions bring to members?
If elected, what will you contribute to the Board of Directors at BFCU?

Have you ever been a director of officer of a financial institution whose charter has
been revoked?
Yes No
Have you previously served on the BFCU Board of Directors?
Yes No
Have you previously served on the BFCU Supervisory Committee?
Yes No
Have you ever been convicted of any criminal offence involving dishonesty or breach
of trust?
Yes No
References
List two references. Please provide name, address and phone number for each.
Reference 1:
Reference 2:

Letter of Intent

Please provide a short statement (attach a statement no more than 200 words) describing why you would like to be a member of the Best Financial Credit Union Board of Directors. Outline how you feel you would best serve the membership, and any other comments you would like to make.

Statement of Acceptance and Signature

If nominated and elected to the Best Financial Credit Union Board of Directors, I		
, agree to attend all monthly board / committee		
meetings when possible, participate in training necessary to understand BFCU		
balance sheet and income statements and support credit union rules, regulations, and		
policies. The BFCU nominating committee has my permission to verify the information		
provided and to contact the references listed. The facts set forth in my application are		
true and correct. I understand providing false information on this application may		
cause disqualification from the Board of Directors elections.		
Signature:		
Date:		

This application, along with a resume and cover letter should be returned to:

Nominating Committee
Best Financial Credit Union
PO BOX 4304
Muskegon, MI 49444

Signature of Members in Support of Application

Printed Name	<u>Signature</u>