

## SWRGTXKUQT[ 'EQO O KVVGG APPLICATION

Name:			Years of Membership:		
Physical Address:	Street	City		State	Zip
Mailing Address:	P.O. Box/Street	City		State	Zip
Email Address:	Home		Work		
Telephone:	Home		Work		
Employment:					
Address:	P.O. Box/Street	City		State	Zip
Current Position:				Years Em	ployed:
1) Have you ever be	een convicted of a crime of di	shonesty?		YI	ES NO

- 2) Are you at least 18 years of age?
- 3) Are you currently employed by LFCU or another financial institution?
- 4) Have You Ever Been Employed by LFCU?
- 5) Do you have any relationship or association with any past or present employees or Directors of LFCU
- 6) Have you served as a paid or volunteer director of another financial institution or credit union within the last three years?
- 7) Have you been employed by another financial institution or credit union within the last three years?

Federal Credit Union? (Use a separate sheet of paper		)K(
Please provide names and telephone numbers of any r	references you would like to use	
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Reference	Telephone	
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Reference	Telephone	
Reference	Telephone	

## ACKNOWLEDGEMENT OF THE APPLICANT

I understand that this completed application must be received in the credit union offices by the published deadline in order to be considered by the Nominating Committee. I acknowledge that a background check and credit report may be completed and that I may be subject to an interview by the Nominating Committee.

To the best of my knowledge, I do not have any personal or professional conflict of interest, in fact or appearance,

which would adversely affect my ability to serve Union.	as a Supervisory Committee member for Lookout Federal Cre
UIIIOII.	
Applicant's Signature	Date

Thank you for your interest in applying for a leadership position at your credit union! Please return this application to:

Lookout Federal Credit Union 275 S. 5th Ave., Suite 210 Pocatello, ID 83201