

OLEAN AREA FEDERAL CREDIT UNION
Volunteer Education Committee Member Certification

Please check one: New Appointment _____ Re-Appointment _____

Name _____ Spouse _____

Residence Address _____

How long at this address _____

Mailing Address (if other than residence) _____

Telephone _____ Cell phone _____

E-Mail Address _____

Employer Name _____

Occupation _____ Title _____

How long with this employer _____ How long in current position _____

Work Telephone _____ Fax _____

Work E-Mail Address _____

Community Activities/Affiliations

Briefly explain why you feel you would be an asset to Olean Area FCU as a Committee Member

By signing below, you authorize Olean Area Federal Credit Union to check your credit and employment history, and obtain reports from third parties, including credit reporting agencies and background checks, to verify your eligibility.

By signing below, I, _____ (*printed name of candidate*) do hereby certify that I am qualified to be a member of the Volunteer Education Committee of Olean Area Federal Credit Union, located at 1201 Wayne Street, Olean, NY, and if appointed, agree to abide by the legal responsibilities of a committee member, is agreeable to appointment and will serve if selected.

(*Signature of candidate*)

(*date*)