

CREDIT UNION OF OHIO

Candidate Application For Board of Directors

Please consider me for a volunteer position with the credit union.

Name Social Security Number (last four digits)

Address City State Zip Code

Home Telephone Number Work Telephone Number

Employer

Job Title Length of Employment

Do you have experience volunteering on a Board of Directors: Yes _____ No _____

If yes, what organization: _____

Length of credit union membership: _____

Credit Union account number(s): _____

Information about your account(s) will remain confidential – only the Nominating Committee
will verify your membership standing.

*Is any member of your family or any individual currently residing within your household
presently serving as a member of the Board of Directors or employed by Credit Union of Ohio?*
Yes _____ No _____

PLEASE COMPLETE INFORMATION ON THE REVERSE SIDE

Briefly describe your primary reason(s) for wanting to serve and the abilities or special interests you may have which you feel would benefit the credit union:

STATEMENT OF AGREEMENT: I understand and am willing to fulfill the duties and responsibilities of a credit union volunteer. I understand that there is no remuneration (pay) for my service as a credit union volunteer. I am a member in good standing with Credit Union of Ohio and agree to allow verification of information provided on this application.
Completed applications will be submitted to the Nominating Committee for further review to determine whether your name will be added to the ballot.

Signature

Date

Please return to the attention of the Nominating Committee by: Noon, October 31, 2026.