

TEXTEL CREDIT UNION CO-OPERATIVE SOCIETY LTD.

**N O M I N A T I O N   F O R M**

***For eligible members interested in being elected to the : Board of Directors, Supervisory Committee and Credit Committee.***

Applicants should complete the entire form. Each applicant will be required to submit a brief resume (one page) to support his/her application. Please be guided by the Criteria for Nominees document.

Candidate's Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Tel. No.'s: (Mobile) \_\_\_\_\_ (Work) \_\_\_\_\_

(Home) \_\_\_\_\_

E-mail : \_\_\_\_\_

Place of Employment \_\_\_\_\_

**NOMINATIONS FOR (tick one):**

Board of Directors

Supervisory Committee

Credit Committee

Candidate's Signature \_\_\_\_\_ Date \_\_\_\_\_

Proposer's Name \_\_\_\_\_ Signature/Date \_\_\_\_\_

Seconder's Name \_\_\_\_\_ Signature/Date \_\_\_\_\_