

MEDICAL AREA FEDERAL CREDIT UNION

Candidate Application for Board of Directors

Last Name	First Name	Middle Initial
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Present Home Address _____

Home Telephone _____

Present Employer _____

Employer's Address _____

Work Telephone _____

Present Job Title _____

Department _____

Supervisor _____

Major duties and responsibilities _____

Employment History (Begin with Present)

<u>From/To</u>	<u>Name and Address of Employer</u>	<u>Job Title</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you have a resume, please include it.

College Education

<u>From/To</u>	<u>Name of Institution</u>	<u>Major</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

High School Education

<u>From/To</u>	<u>Name of Institution</u>
_____	_____

Other Education or Academic Awards

Are you presently a member of MAFCU? _____

What is your major reason for running for the MAFCU Board of Directors?

Candidate's Signature

Date