

## **Volunteer Application**

**Thank you** for expressing interest in volunteer service to your credit union. If you would like to be considered by the Volunteer Recruitment Committee, please fill in all the blanks below or attach a resume that fully responds to the areas you do not complete. The Committee will review your application and contact you directly to set up an interview at your convenience.

The completed application, including the Notice to Volunteers Regarding Consumer Reports, should be forwarded to:

**APGFCU** Attn: Senior Executive Assistant to the CEO P.O. Box 1176 Aberdeen, MD 21001

Please print clearly below.

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Name:	Member #:
Address:	
Phone #:	Last four digits SSN:
Employer:	Job title:
Address:	
Email:	Work phone:
Please note:	
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- 1. Applicants must be a current member of APGFCU
- 2. Applicants must have been a member of APGFCU or another credit union for at least two years

Applicant must have previously served in a volunteer capacity with another credit union.

Are you a current APGFCU member?
Have you been a member at APGFCU or another credit union for at least two years?
Do you serve or work in any capacity for another financial institution?
If yes, please explain:

MISC-ID-FM-121417



Work Experience:
Educational Background ( <i>Please list all degrees and certifications</i> ):
Tell us why you are interested in becoming a volunteer with APGFCU:
Tell us what committee(s) interest(s) you:
Please indicate any knowledge or skills that you may have in the following areas:
Demonstrated Leadership Qualities:
Einancial Deports Accounting Budgetings
Financial Reports, Accounting, Budgeting:
Management Background:



Strategic Planning:	
- W	
Policy Making:	
Special Knowledge and Skills:	
Any Other Financial or Management Related Experience:	
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ase sign that you have read, understand, and authorize the	e following statement:
would like my name to be presented to the Volunte	or Pagruitmant Committee for
would like my name to be presented to the Volunted Insideration as an APGFCU volunteer."	er Recruitment Committee for
isideration as an APGPCU volunteer."	
licant's Signature	Date



## **Notice to Volunteers Regarding Consumer Reports**

Thank you for your interest in serving as an APGFCU volunteer. In our responsibility to our membership, we require our volunteers to consent to a consumer credit report investigation, including the retrieval of information concerning your credit and indebtedness, your character, general reputation, personal characteristics and mode of living, if applicable.

I hereby authorize APGFCU to obtain consumer credit reports as described, and authorize any consumer reporting agencies to submit information or opinions of myself, including data received from other sources, in order that my volunteer qualifications may be evaluated. I hold said persons and/or organizations blameless and without liability for statements or opinions made about me in compliance with the Fair Credit Reporting Act.

If you make a written request within a reasonable period of time after receipt of this disclosure, APGFCU will provide the name, address and telephone number of the reporting agency and the nature and scope of any consumer report request will be disclosed within five business days.

Before adverse action is taken based on a consumer report, you will be notified of the adverse action, be provided with a copy of the report, the name, address and telephone number of the reporting agency, and a summary of your rights under the Fair Credit Reporting Act, including the right to dispute the accuracy or completeness of the report with the consumer reporting agency.

Print your name		
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Applicant's Signature		Date