

Board Member Application

Elevations Credit Union is a progressive, member-owned, community-focused banking alternative, whose core purpose is to provide solutions for a better life. Its Board Members represent the best interests of credit union members in the long- and short-term, a complex but worthwhile challenge.

Elevations Credit Union Board Members share its core values.

- *Integrity – We build trust through honest and ethical actions*
- *Respect – We treat each other with dignity and value individual differences*
- *Passion – We are deeply devoted to our membership and community*
- *Creativity – We are dedicated to learning and innovation*
- *Excellence – We exist to serve our members and each other with audacious excellence*

In order to guarantee the Credit Union's success and existence in perpetuity, Elevations Credit Union Board Members help attain its vision and member value proposition, outlined here.

Vision – Amazing experiences. Raving fans!

Member Value Proposition – Your success and dreams matter to us. As your advocate, we serve you with financial expertise, convenience and kindness.

We appreciate your interest in our Credit Union. Your qualifications as a Board Member are important in our overall selection process. A clear understanding of your background will aid us in considering you for a Board Member position that best meets your qualifications. Please print or type the requested information:

Name			Date		
Street		City		State	Zip
Home Phone			Work Phone		
Fax			Email		
Employed By					
Work Address					
Street		City		State	Zip
Title					
Date Joined Elevations Credit Union					

If you are related to any of our staff or officials, please state the name(s) and relationship(s) to those individuals:

Name	Relationship
Name	Relationship
Name	Relationship
Name	Relationship
Name	Relationship
Name	Relationship

Are you currently serving as an officer, director or owner of any other business? If so, please provide the name, address and phone number of that business:

Business	
Address	
Phone	

Competencies	No Experience	Limited Experience	Experienced	Highly Competent
Organizational Finance/Budget				
Enterprise Business Management				
Strategic Planning				
Operational Planning				
Marketing				
Branding				
Talent Management				
Policy Development				
Community Relations				
Leadership Development				
Enterprise Risk Management				
Government Relations				
Mergers/Acquisitions				
Technology Solutions				
Customer Service				
Accounting/CPA				
Audit/ Supervisory Committee				
Regulatory/Compliance				
Other:				
Other:				
Other:				

Reference 1

Name			
Street	City	State	Zip
Home Phone		Work Phone	
Fax		Email	

Reference 2

Name			
Street	City	State	Zip
Home Phone		Work Phone	
Fax		Email	

Board Members of Elevations Credit Union pledge to adhere to the Conflict of Interest/Code of Conduct and policies and guidelines adopted by the Board of Directors. 12 U.S. Code Section 1785(d) provides that "any person who has been convicted of any criminal offense involving dishonesty or a breach of trust, or has agreed to enter into a pretrial diversion or similar program in connection with a prosecution for such offense, may not participate, directly or indirectly, in the conduct of the affairs of any insured credit union," and such persons are therefore prohibited from performing the required duties of a Board Member at Elevations Credit Union.

Have you ever been convicted of a felony or a financially-related misdemeanor?

Yes

No

Please Read the Following Carefully:

Certification: I certify that the facts contained in this Board Member Application are true and correct to the best of my knowledge. You have my permission to contact those parties listed as references, employers and other business interests, to obtain information regarding me and my qualifications to serve as a Board Member for Elevations Credit Union.

I authorize Elevations Credit Union to obtain credit reports, criminal reports and other background information regarding me, and authorize the custodians of such information to provide that information to the Credit Union. I also authorize Elevations Credit Union to check my bondability with the Credit Union's insurance carrier. If I request it, the Credit Union will divulge the name and address of any credit bureaus from which it received a credit report pertaining to me.

I understand that by submitting this application to Elevations Credit Union, I am under no obligation to accept a Board Member position.

Signature _____ Date _____