**Bahama Islands Co-operative Credit Union Limited**

**ANNUAL GENERAL MEETING**

**NOMINATION FORM**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ A/C: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TELEPHONE #’s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ P.O. BOX \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I wish my name to be placed in nomination for one of the following elective positions:**

 **Board Member**

**Supervisory Committee Member**

 **Credit Committee Member**

**Qualifications:**

|  |
| --- |
|  |
|  |
|  |
|  |

**Employment History:**

|  |
| --- |
|  |
|  |
|  |
|  |

**Credit Union Experience/Training:**

|  |
| --- |
|  |
|  |
|  |
|  |

**NOTE: Your resumé and signed Declaration must be submitted with this Nomination Form**

**Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_**

 **(Location)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **MEMBER’S NAME (PLEASE PRINT) SIGNATURE**