

4401 Theater Drive • P.O. Box 5129 • Evansville, IN 47716-5129 • (812) 477-9271

Liberty Federal Credit Union Board of Directors Application

To assist the Nominating Committee in selecting a slate of interested and qualified applicants for the Board of Directors, please complete the following items to submit your application for consideration. Deadline for the receipt of applications is no later than 6 PM CDT, Friday August 30, 2024. You may call (812) 477-9271 or 1-800-800-9271 Ext. 1419 to verify the receipt of your application.

Board applicants must be 18 or older, have accounts in good standing at Liberty FCU, and be primary members of Liberty FCU for a minimum if one year prior to the annual meeting scheduled March 11, 2025. Applicants may not have an immediate family member (spouse, child, sibling, parent, grandparent, grandchild, stepparent, stepchild, or similar adoptive relationship), who is a paid employee of the credit union or its subsidiaries.

Contact Information:		
First Name:	Last Name:	
Address:	Home Phone:	
City:	Cell Phone:	
State:	Work Phone:	
Zip:	Email Address:	
Please list all Liberty FCU account numbers on w	hich you are an owner:	
Please list any other Liberty FCU account number ————————————————————————————————————		
☐ Currently Employed ☐ Retired		
Present Employer:		
Employer:	Supervisor:	
Address:		
Job Title:	# of Years:	
Responsibilities:		

■ Previous	Employment:
Previous En	nployer:
Employer:	Supervisor:
Address:	Work Phone:
Job Title:	# of Years:
Responsibili	ties:
■ Education	n:
Universities A	attended:
University De	grees Attained:
List any skills	, talents, or educational background you feel would be an asset as a board member:
■ Liberty F(CU Member Information:
_	rty FCU's products and services do you use?
WITICIT OF LIDE	rty PCO's products and services do you use:
What do you	feel are some of the most beneficial products and services offered by the credit union?
Please list and	d explain any products, services or policies you would like to be improved.

■ Liberty FCU Member Information (Continued):			
How were you eligible for membership at the time you became a member of Liberty FCU?			
Are you a h	poard incumbent?		
☐ Yes			
	previously served on the Liberty FCU Board of Directors?		
☐ Yes	□ No		
Have you p	previously served on the Liberty FCU Supervisory Committee?		
☐Yes	□No		
Have your	proviously sorred on the Liberty ECLI Sorvice Organization, LLC Volunteer Management Committee?		
Have you p ☐ Yes	previously served on the Liberty FCU Service Organization, LLC Volunteer Management Committee?		
□ 163			
Are you bo	ndable?		
☐ Yes	□ No		
	ever been convicted of a crime, excluding misdemeanors and summary offenses, in the past seven h has not been annulled, expunged or sealed by a court?		
☐ Yes	□No		
If "Yes", de	escribe in full:		
,			
■ Referen	ices:		
List two ref	ferences:		
(Please include name, address and phone number for each.)			

other qualification		you could best serve the membership, any educational or ments you would like to make. You may attach an additional
	ion will be used for the credit union's you are selected as a nominee.	s newsletters and posters to notify the membership of the
	attend all monthly board and comm to understand the credit union's bal- election, and support credit union Committee has my permission to v	Liberty Federal Credit Union Board of Directors, I agree to ittee meetings when possible, participate in training necessary ance sheet and income statements within six months after the rules, regulations, and policies. The Liberty FCU Nominating verify the information provided and to contact the references plication are true and complete. I understand that falsifying a lification from the board election.
		By signing below, I verify that I have read, understand and agree with the above statement.
	Signature:	
	Date:	

Please provide a short statement (maximum of 200 words) describing why you would like to be a member of