



Board of Directors Application

Submission:

For consideration as a candidate, please email the following information to Joseph Balducci, Chair, Nominating Committee at jbalducci@cpsed.net no later than April 11, 2025

- ✓ Board of Directors Application
- ✓ Resume

General Information

- A. Name: _____
 - B. Street address: _____
 - C. City _____ State _____ Zip Code: _____
 - D. Phone number: Home/Cell (____) _____ - _____ Work (____) _____ - _____
2. Employer's Name/Location: _____
- A. How long have you worked for this employer? _____
3. How long have you been a member of the CME Credit Union ? _____
4. Have you previously served as a Director/Officer for CME Credit Union? Yes / No
If yes, when and in what position: _____
5. Briefly state why you would like to be a Director of CME Credit Union.

6. Have you served as an Official in any other credit union(s) or financial institutions?
Yes / No
If yes, where, when, and in what position(s)
 - _____
 - _____
 - _____
 - _____
7. Are you willing to attend on your own time, conferences, seminars, etc. related to the duties of a credit union official? Yes / No

Areas of Expertise/Experience

Indicate your area(s) of expertise/experience by indicating E (expert), V (very competent), K (knowledgeable) and NA (Not Applicable) next to the applicable items within the following list. See below for definitions of E, V, K and NA.

Definitions

- ✓ **(E) Expert:** Possess degree/diploma/certificate and/or have work experience in that same area.
- ✓ **(V) Very Competent:** Direct successful experience as part of your work or volunteer activities.
- ✓ **(K) Knowledgeable:** Knowledge of the fundamentals and concepts encountered in this skill area.
- ✓ **(NA) Not Applicable:** The area of expertise/experience does not apply to you.

	E	V	K	NA
1. Credit Union/Bank Management, Officer, or Director	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Details: _____

2. Financial Management & Accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Details: _____

3. Strategic Planning Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Details: _____

4. Information Technology Planning and Implementation

Details: _____

5. Marketing, Writing and/or Journalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Details: _____

Please review and acknowledge the following:

I certify, to the best of my knowledge, the above information is true and correct.

Date: _____

Name (please print): _____ Signature: _____