



NOMINATION AND ELECTION QUALIFICATION FORM
FOR SUPERVISORY COMMITTEE

(Please Type or Print)

Name of Applicant _____

1. How long have you been a member of PHFCU?

2. What qualifications do you have for this elective office?

3. Do you have any conflict of interest activities or functions related to this elective office?

4. Have you been bonded before? If yes, explain. Are you bondable? Now? If not, why?

5. Have you ever been charged or convicted of any State or Federal crime involving dishonesty or breach of trust, which is punishable by imprisonment for a term exceeding one year under State or Federal law? If yes, explain.

6. Have you ever engaged in any activity for which you were subsequently accused of breaching a fiduciary duty? If yes, explain.

7. Have you ever engaged in any activity likely to cause insolvency or substantial dissipation of assets or earnings, or likely to seriously weaken the condition of a credit union, or otherwise seriously prejudice the interests of insured members? If yes, explain.

8. Have you ever received a suspension notice from work within the past five years? If yes, explain.

9. Have you ever been charged with fraud or embezzlement? Did this charge result in an indictment or conviction? If yes, explain.

10. Have you ever served as a director of a financial institution? Did you complete your term of office? If not, please explain why not.

11. If elected, are you willing to attend all meetings unless legitimate circumstances prevent your attendance? (NOTE: Unexcused absence from three consecutive

17. Are you familiar with the PHFCU Campaign and Election Policies and Procedures?

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained herein as necessary in determining my candidacy. I further understand that any false or misleading statements given in this application, questionnaire or interview may result in my disqualification as a candidate for the PHFCU Board of Directors, and that I agree to abide by all of the rules and regulations governing this election.

Date

Signature of Candidate

Printed Name

Witness Signature

Printed Name