**INDIVIDUAL APPLICATION FOR APPROVAL OF OFFICIAL OR SENIOR EXECUTIVE OFFICER**

**BIOGRAPHICAL REPORT**

1. **Personal Information**

a. Name

Last First Middle (no initials):

b. Residence

Street Address:

City State ZIP Code:

c. If at residence less than five years, list addresses and dates occupied for past five years.

Date From Date To Number and Street, City, State, ZIP Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d. Date of birth:

e. Place of birth:

f. Social Security Number:

g. Citizenship:

i. Telephone and fax numbers where you may be reached during business hours:

Area Code--telephone Number(s)

j. Trade names and/or other names used in place of given name and period of and reason for use.

Name Period of Use Reason for Use

2. **Employment Record**

a. List employment in reverse chronological order for the last five years. If not employed due to retirement,

please indicate date retired and employment information prior to retirement date. (Use separate sheet if that is easier)

Date From - Date To:

Name/Location (City, State):

Nature of Business:

Position Held:

Nature of Duties:

Reason for Leaving:

b. Have you ever been dismissed or asked to resign from any past employment, including a less than

honorable discharge from military service? Yes No If “yes,” complete the following:

Employer’s Name:

Address/Telephone:

Position Date of:

Discharge:

Explanation:

**3. Education and Professional Credentials**

a. List each diploma/degree from high schools, colleges, universities, or other schools.

School’s Name/Location From To Degree:

b. List each professional license or similar certificate you now hold or have held (for example, Attorney,

Physician, CPA, NASD or SEC registration).

License Issuing Authority Date Issued Expiration

4. **Business and Financial Institution Affiliations**

a. List any businesses (corporation, partnership, joint venture, trustee) with which you are associated.

Business Name/Location Nature of Business Position/Relationship

Percent Ownership

b. List any financial institution where you are currently or have previously been an official, employee,

director, committee member or owner (10% ownership or more of any class of stock).

Business Name/Location Nature of Business Position/Relationship Percent

Ownership

c. Are you in the process of being considered for a senior executive officer or director position by any other

regulatory agency?

Yes No

If “yes,” provide the name of the agency and the institution or holding company.

5. **Legal and Related Matters**

**CRIMINAL OFFENSE GUIDELINES**

The Federal Credit Union Act, Subchapter II, section 205(d), requires that, except with the written consent of the NCUA Board, no person shall serve as director, officer, committee member, or employee of an insured credit union who has been convicted or who is hereafter convicted, of any criminal offense involving dishonesty or breach of trust. To assist the NCUA Board in making a determination of the fitness of a person who is selected to serve, the specific information below must be furnished.

(If “yes” is answered to any item in (a)-(g) below, describe the situation in detail, including the name and location of the institution, business, or parties involved, the date(s), nature of the

charge/association/proceeding, name and address of court involved, and the disposition.)

a. Have you ever been the subject, in your individual or corporate capacity, of a prior or current application

or notice that was filed in final form and subsequently denied, withdrawn, or otherwise failed to obtain

favorable action, or other regulatory matter and/or administrative action pertaining to any federal or state

financial institution?

Yes No

b. Have you been associated as a senior executive officer, director, or principal shareholder (owning 10% or

more of the outstanding stock) with any insured depository institution or financial institution holding

company that has been subject to any enforcement action or have you been personally subject to a

prohibition or removal order, civil money penalty, or other enforcement action?

Yes No

c. Have you been associated as a senior executive officer, director, or principal shareholder of any insured

depository institution that: (1) failed, (2) received financial assistance from a financial institution depository

agency (e.g., NCUSIF, FDIC, Resolution Trust Corporation, or former Federal Savings and Loan Insurance

Corporation), or (3) was a merger partner with an institution that received financial assistance from a

financial institution depository agency?

d. Have you ever been involved, or are you currently involved, in any lawsuit, formal or informal investigation,

examination, or administrative proceeding (excluding routine or customary audits, inspections, and

investigations) issued against, entered into by, or involving you or a company with which you are or were

associated that may result in or resulted in any sanction, fine, monetary damage, loss of right or benefit,

revocation of license, agreements, undertakings, consents or orders with any federal or state court, any

department, agency, or commission of the U.S. government or state, municipal, or foreign government

entity?

Yes No

e. Have you or any business or enterprise with which you have been associated as an officer, including a

senior executive officer, director, or principal shareholder of 10% or more of outstanding stock, filed for

bankruptcy or forfeited property?

Yes No

f. Has a claim pertaining to a fidelity bond ever been filed against you or have you ever been denied

coverage under a fidelity bond?

Yes No

g. Are there any civil suits or any material legal or administrative proceeding pending against you?

Yes No

h. Have you ever defaulted on a personal loan, loan to your company, or loan in which you were a

guarantor?

Yes No

If “yes,” provide complete details, including direct and indirect debt terms, defaulted amount, and lender.

i. Have you or any business or enterprise with which you are or were associated as an officer, including a

senior executive officer, director or principal shareholder (owning 10% or more of the outstanding stock),

been the subject of any law enforcement agency's charge, arrest, indictment, conviction, conviction

whereby the record was subsequently expunged, or have you pleaded nolo contendere to any criminal

matter (other than minor traffic violations)?

Yes No

If "yes," complete the following:

Name/Type of Business

Relationship

Stock Owned

Nature of

Charge/Proceeding

Date of

Charge

Jurisdiction

Location

Disposition Date

6. **Additional Information**

Present any other information you believe is important to evaluate your filing. If you are involved in the

organization of a new institution, discuss your specific role.

**Privacy Act Notice**

A copy of this document is provided to the NCUA as required under various statutes and implementing regulation(s). To the extent that it contains personal and financial information about persons, the information may be subject to the Privacy Act of 1974 (5 U.S.C. § 552a) which provides safeguards for personal information. The NCUA may, at its discretion, disclose any or all of the information obtained concerning you to other regulatory agencies or other law enforcement or governmental agencies, in connection with the investigation of a possible violation of any federal or state statute or when such release is determined to be in the best interest of the appropriate regulatory agency and consistent with the public interest and applicable law. The NCUA may obtain information about you from any and all sources without limitation. These documents are considered confidential and generally are exempt from public disclosure under the authority of 5 U.S.C. § 552, relating to a personnel, medical, or similar record, including a financial record, or any portion thereof, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy. I understand the NCUA may conduct extensive checks into my background, experience, and related matters in conjunction with my application or filing. I certify that the information contained in the biographical report and/or financial report has been carefully examined by me and is true, correct, and complete. I also certify that I read the Privacy Act Notice provided in the attached Credit Report and Background Investigation Authorization. I further certify that the information provided in this application has been carefully examined by me and is correct, complete, and made in good faith. Any misrepresentation or omission of a material fact constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §1001 and §1006.

I understand that the NCUA may disapprove any applicant they determine whose employment or affiliation with

the credit union is not in the best interest of the membership of the credit union or of the public.

Certification:

Signature

Print or type name

Title (if applicable)

**CREDIT REPORT AND BACKGROUND INVESTIGATION AUTHORIZATION**

The National Credit Union Administration (NCUA) may evaluate the competence, experience, character, and

integrity of any individual who is to serve as an official, employee, or committee member of a newly chartered or troubled federally insured credit union. This is in accordance with section 212 of the Federal Credit Union Act (12 USC §1790a). NCUA may disapprove any individual whose employment it believes will not be in the best interest of the credit union or of the public. To assist in the evaluation process, NCUA may obtain and review an individual’s credit report. NCUA may also verify information contained in this application and, if deemed necessary, may also conduct an investigation into my background.

Last First Middle:

Street Address City State Zip Code:

Social Security Number:

Date of Birth:

**My signature below authorizes NCUA to obtain a copy of my credit report.**

Signature

Date

**PRIVACY ACT NOTICE**

The Privacy Act of 1974 (Public Law 93-579) requires that you be advised as to the legal authority, purpose and uses of the information solicited by this form. Pursuant to Sections 104, 205(d), and 212 of the Federal Credit Union Act, the information in this form is requested for the purpose of completing the investigation required for a new federal credit union or proposed officials of a credit union declared to be in a troubled condition status. The information in this form is for use in determining the competence, experience, character and integrity of the applicant. NCUA may conduct a more involved background check as part of the approval process. You will be notified if we need to resolve a concern after concluding the background check. This form may be disclosed to any of the following sources: a congressional office in response to your inquiry to that office; an appropriate federal, state, or local authority in the investigation or enforcement of a statute or regulation; or employees of a federal agency for audit purposes. Failure to complete this form or omission of any item of information, except for disclosure of your social security number, may result in a delay in the processing of this application. In accordance with Section 792.68 of NCUA's regulations, you are not required to furnish your social security number on this form. Your social security number, if voluntarily provided, will be used to more easily verify the information required by this form. No penalty will result to you as a senior executive officer or as a compensated or volunteer official or to the credit union if you do not provide your social security number.