## VOLUNTEER APPLICATION



Which Volunteer Opportun	nity are you interested in (p	lease check all that apply)?
Board of Directors	Supervisory Committee	Community Advisory Council
Name		
Address		
Home Phone	Cell Phone	Work Phone
Email Address		
Occupation / Employer		
What educational backgrouperations (seminars, conf		ad in regard to financial institutions and professiona?
Areas of your expertise yo	u believe may be valuable	for the volunteer position?
Briefly describe any other	volunteer activities:	
Explain why you would like	e to be an MMFCU volunte	er:
Have you ever been bonde	ed? Yes No	
Has bonding ever been re	fused? Yes No	

Completed forms can be emailed to Cindy Plante at cplante@mmfcu.org or mailed to Mid Minnesota Federal Credit Union at PO Box 746, Brainerd, MN 56401.