



Kilsaran & District Credit Union Ltd.

Board of Director Application Form:

Name: _____ Member Number: _____

Contact Details:

Address: _____

Home phone: _____ Mobile: _____ Email: _____

DOB: _____ Occupation: _____

Please describe your background, and relevant experience to your application as Director.

Why do you seek a Director position with Kilsaran & District Credit Union?

Please briefly outline the specific skills you would bring, or contributions you hope to make to the Credit Union

Would any potential conflicts of interest exist if you were a Director of the Credit Union? If any please identify

Have you ever been made bankrupt or restricted/disqualified as a Company Director?

Yes ☐ No ☐

If Yes, please describe circumstances:

Are you willing to undertake all Fitness & Probity reviews that may be required by Kilsaran & District Credit Union or any relevant regulatory body?

Yes ☐ No ☐

Please provide details of relevant third level qualifications:

Signed: _____ Date: _____

Thank you

BOARD OF DIRECTORS CRITERIA

Persons wishing to apply to be a candidate for election as a Director must:-

- be a member of Kilsaran & District Credit Union Limited,
- be 18 years of age or over,
- be a natural person,
- satisfy Fitness and Probity requirements,
- consent to a Judgment check and
- meet the skills-set criteria of the Nomination Committee, to include professional experience in financial services and/or accounting and/or ICT and/or legal practice and/or an appropriate third level qualification.

Interested members should download the attached Board of Director Application form and return same to:

Chairperson of Nominating Committee
Kilsaran & District Credit Union Ltd.
Main Street Kilsaran
Castlebellingham
Co. Louth.