TATECO (POS) CREDIT UNIONCO-OPERATIVE SOCIETY LIMITED
Tobago Update

NOMINATION FORM

Note: "Applicants are advised to submit :

1. The completed form in legible handwriting.
2. A resume'
3. A passport size photograph (white background, business attire)
4. A recent utility bill. *

Please be guided by TATECO's Nomination Policy.
Nomination Forms must be sent to the Secretary, Board of Directors **on or before January 31st 2025**

Applicant's Full Name: ----------
(BLOCK LETTERS)

Membership
Account Number: ---------- Date of Birth: ----------

Date Joined TATECO (POS) Credit Union: ----------

Residential Address: ----------

Mailing Address (If different from above): ----------

Occupation: ---------- Tel No. (Home): ---------- (Mobile): ----------

Employer's Name: ----------(Off):----------

Employer's Address: ----------

Nominated for (please tick) Tobago Committee ☐

Membership
Proposer: ---------- Account No: ----------

Proposer's Signature: ----------

Proposer's Address: ----------

Membership
Seconder ---------- Account No: ----------

Seconder's Signature: ----------

Seconder's Address: ----------

I, ---------- do declare that I have read the contents of **TATECO (POS) Credit Union's** Nomination Policy and that I am eligible under the Section **"Qualifications"** stated therein, TATECO (POS) Credit Union is therefore authorized to obtain further information on my credit and employment history and any such source is hereby authorized to provide the requested information.

TATECO (POS) Credit Union is also authorised to disclose to any Credit Bureau and other credit granters any information about my credit history. I agree to jointly and severally indemnify TATECO (POS) Credit Union against any and all claims in damages or otherwise arising from disclosure on your part.

TATECO (POS) Credit Union agrees to use the information obtained as Confidential solely in connection with the current or contemplated business relationship between the parties and not for any purpose other than as authorized by this Agreement without the prior written consent of an authorized representative of the Disclosing Party.

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NAME (In Block Letters) **SIGNATURE**

Date: ----------

Note: An applicant is restricted to select to serve either on the Board of Directors, Supervisory Committee or Credit Committee.

***If the utility bill is not in the name of the nominee, then a letter of authorization from the person whose name appears on the bill along with a copy of that person's ID.**