



ELKS CITY OF CASTRIES CO-OPERATIVE CREDIT UNION LTD

VOLUNTEER APPLICATION FORM



Please select the Committee you are applying for.

Board of Directors

Supervisory Committee

Credit Committee

PERSONAL DETAILS

Full Name	
Address	
Contact Number(s)	
Email Address	
Account Number	

WORK EXPERIENCE

Provide details of your employment history beginning with your most recent employment.

Current Job Title	
Company	
Employment Period	
Previous Job Title	
Company	
Employment Period	
Previous Job Title	
Company	
Employment Period	



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ACADEMIC QUALIFICATIONS

Provide details of your academic performance beginning with your most recent achievement.

Institution 1	
Area of Study	
Level	
Date Awarded	
Institution 2	
Area of Study	
Level	
Date Awarded	

VOLUNTEER EXPERIENCE

Provide details of your present and past volunteering experience.

Organisation 1	
Role	
Years of Service	
Organisation 2	
Role	
Years of Service	
Organisation 3	
Role	
Years of Service	



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SPECIAL SKILLS

Provide a summary of your skills and special abilities which can be used in your role as a volunteer.

Applicant's Signature

Date

One passport size photo MUST be attached to each application. Application forms can be submitted directly at our office on Chisel Street OR emailed to info@elkscreditunion.com with the subject "Nominations Committee" OR via post to:

Nominations Committee
Elks Co-operative Credit Union
P O Box 1924
General Post Office
Castries
LC04 101