



# Credit Union Committee Volunteer Application Form

Membership Number (if existing member): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Expertise/Experience (please select all that apply):

☐ Finance

☐ Human Resources (HR)

☐ Investments

☐ Information Technology (IT)

☐ Marketing

☐ Business knowledge/acumen

☐ Other (please specify your field of expertise or experience)

\* Please attach your C.V. with this application

\* Completed application form should be returned to:

**Nominations Committee**  
Blanchardstown & District Credit Union  
9 Blanchardstown Business Centre,  
Clonsila Road, Blanchardstown, Dublin 15

or emailed to: **info@blanchardstowncu.ie** with the subject line **VOLUNTEER**

*All applications will be dealt with in the strictest confidence, and training will be provided for volunteers who are accepted. Successful volunteers will be contacted.*

*Blanchardstown & District Credit Union is committed to creating a diverse environment and is proud to be an equal opportunity employer. All qualified applicants will be considered for positions without regard to race, color, religion, gender, gender identity or expression, sexual orientation, national origin, disability status or age.*

*The Credit Union reserves the right to refuse a person as a volunteer and where appropriate will give a reason for that refusal as Blanchardstown & District Credit Union is bound by the standards of Fitness & Probity, issued by the Central Bank of Ireland. Blanchardstown & District Credit Union Ltd. Is regulated by Central Bank of Ireland.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_