

# Ballinasloe Credit Union Volunteer Application Form

Please complete the information below, which will be treated with confidence



**BALLINASLOE**  
Credit Union  
LOCAL LOYAL LENDING

## Personal Details

Name	
Address	
Credit Union Member Account Number:	
Phone	
Mobile	
Date of Birth	
Email	

## Volunteer Role

Why are you interested in volunteering with the Credit Union?	
Please list up to five skills, knowledge or abilities you would like to bring to the Credit Union	<ul style="list-style-type: none"><li>•</li><li>•</li><li>•</li><li>•</li><li>•</li></ul>
What would you like to do in the Credit Union or what areas are you interested in?	
Please provide brief employment details which may be relevant to this application	
Where did you hear about volunteering with Ballinasloe Credit Union?	

I confirm I have read the Recruitment Privacy Notice and agree to the processing of my data as set out in the notice.

Signed: \_\_\_\_\_

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

Please return completed form for attention of Nomination Committee or email to: [info@ballinasloecreditunion.ie](mailto:info@ballinasloecreditunion.ie)