



**NOTES**

- (1) All questions must be answered
- (2) If the question is Not Applicable write NA in space provided
- (3) Document Checklist
  - a. Resume - signed and dated by the Nominee
  - b. Two (2) valid forms of photo identification (DP/PP/ID)
  - c. Proof of Address
  - d. Passport size photograph (white background/front facing)
  - e. Completed Nomination Forms.

Place completed nomination forms and all supporting documents into a sealed envelope. State the position you are seeking election for on the front of the envelope, i.e., the **Supervisory Committee; Board of Directors or Credit Committee.**

**NO NAMES ON ENVELOPES PLEASE!**

The nominee must also address the envelope to: The Chairman, Nominations committee, TWCU Credit Union Co-operative Society Limited, Nos. 105/107 Henry Street, Port of Spain.

Deposit the sealed envelope(s) into the lockbox labelled '**Deposit Nominee Applications Here**', located in the Credit Union office's C.S.R area, on or before the **Extended** deadline of **3:00 p.m., Friday 14<sup>th</sup> February, 2025.**

**Based on position nominated, address envelope as follows:**

The Chairman Nominations committee TWCU Credit Union Co-operative Society Limited Nos. 105/107 Henry Street, Port of Spain <u><b>Supervisory Committee</b></u>	The Chairman Nominations committee TWCU Credit Union Co-operative Society Limited Nos. 105/107 Henry Street, Port of Spain <u><b>Board of Directors</b></u>	The Chairman Nominations committee TWCU Credit Union Co-operative Society Limited Nos. 105/107 Henry Street, Port of Spain <u><b>Credit Committee</b></u>
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**\*\*\* LATE APPLICATIONS WILL NOT BE ACCEPTED \*\*\***



**TWCU CREDIT UNION  
CO-OPERATIVE SOCIETY LIMITED**

# NOMINATION FORM

Mr./Mrs./Ms. \_\_\_\_\_  
(NOMINEE NAME IN BLOCK LETTERS)

a member of TWCU Credit Union Co-operative Society Limited (Credit Union), in good financial standing was nominated by

Mr./Mrs./Ms. \_\_\_\_\_  
(PROPOSER'S NAME IN BLOCK LETTERS)

(who is also in good financial standing) to serve the Credit Union in the following capacity:

Supervisory (Term 1 yr.)       Board of Directors (Term 3 yrs.)       Credit Committee (Term 1 yr.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Member #: \_\_\_\_\_  
(PROPOSER) (DD/MM/YYYY)

SECONDED by Mr./Mrs./Ms.: \_\_\_\_\_  
(SECONDER'S NAME IN BLOCK LETTERS)

a member in good financial standing of TWCU Credit Union Co-operative Society Limited.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Member #: \_\_\_\_\_  
(SECONDER) (DD/MM/YYYY)

## NOMINEE INFORMATION

D.O.B. \_\_\_\_\_ Date of Membership \_\_\_\_\_ Member # \_\_\_\_\_  
(DD/MM/YYYY) (DD/MM/YYYY)

Mailing Address: \_\_\_\_\_  
Postal Code \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

DP #: \_\_\_\_\_ National ID #: \_\_\_\_\_ Passport #: \_\_\_\_\_

NOMINEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(DD/MM/YYYY)

Contact Numbers: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Current Place of Employment \_\_\_\_\_ From: \_\_\_\_\_  
(DD/MM/YYYY)

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

Previous Place of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

Previous Place of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

Previous Place of Employment: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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

Education: Tick ✓ all that apply: -  Primary  Secondary  Post Secondary  Tertiary  Vocational

Credit Union Service/Experience: \_\_\_\_\_

Other Co-operative Activities: \_\_\_\_\_

Other Skills/Activities (Cultural, Sporting etc.): \_\_\_\_\_

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### INFORMATION - PROPOSER

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

Contact Number: \_\_\_\_\_

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

### INFORMATION - SECONDER

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

Contact Number: \_\_\_\_\_

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



### **FIT AND PROPER CRITERIA**

Kindly provide a response to the following questions by ticking the relevant box:

1. Nominees shall possess high standards of integrity, morality, competence, diligence, capability, fairness, honesty and an exceptional reputation.
2. Nominees shall exercise sound judgement in conducting and managing the Credit union's business.
3. Nominees shall demonstrate that they are able to manage their personal financial affairs to demonstrate strong financial discipline and integrity.
4. Nominees should not have engaged in business practices that appear to be deceitful, oppressive, or improper (whether lawful or not) or which discredits his method of conducting business.
5. Nominees shall not possess an employment record that indicates that he/she has been found in acts of impropriety, in the handling of his/her employer's business or has been disqualified from acting as management and/or Director of a business or serving in a managerial capacity because of any wrongdoing.
6. Except for new business failures unrelated to acts of malice, moral, turpitude or dishonesty, nominees should not have been a Director, Partner or otherwise involved in a company that has gone into receivership, insolvency, or compulsory liquidation, while the nominee was connected with that organization or within a reasonably short period after the nominee's departure from the institution.
7. Nominees should not have been an Owner, Manager or Director of a company, partnership, or other organization that has been refused: registration, authorization, membership, or license to conduct trade, business or profession or has had that registration, authorization, membership or license revoked, withdrawn, or terminated.
8. Nominees shall agree to understand, accept, and uphold their fiduciary obligations to TWCU and accordingly to act always, in the best interest of the Society.
9. A former employee of TWCU may not offer themselves as a nominee for election to the Board or any Statutory Committee until a period of at least three (3) years has elapsed from the date of separation from TWCU.
10. Nominees will be required to disclose any other business interest that may result in a conflict of interest and report any future business interests that could result in a conflict of interest.

**[END OF SECTION – REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]**



**TWCU CREDIT UNION  
CO-OPERATIVE SOCIETY LIMIED**

**DECLARATION BY NOMINEE:**

I \_\_\_\_\_, a member of TWCU Credit Union Co-operative Society Limited, hereby accept being nominated by \_\_\_\_\_ to serve (if elected) on the \_\_\_\_\_ of the Credit Union.

In furtherance of this acceptance, I hereby declare as follows:

1. is 18 years of age or over and has been a member for not less than two years;
2. is not an employee of or engaged as a consultant or a contractor by the Society;
3. is not an officer or employee in any other Credit Union in Trinidad and Tobago;
4. is a member in good standing (Member must be contributing to shares consistently);
5. is not an inactive or a delinquent member in TWCU or a bad debtor in any other Credit Union or financial institution;
6. is not currently bankrupt or has filed for bankruptcy in the last 10 years;
7. is not guilty of dishonesty or has been charged or convicted of any criminal offence or fraud;
8. has never been involved in the mismanagement or collapse of a Credit Union or any other financial institution;
9. is not of unsound mind;
10. has been nominated and seconded by two (2) members of TWCU who are also in good standing;
11. has adequate experience and/or knowledge to conduct the function of the desired role;
12. has obtained a police Certificate of Character (within six months prior to the submission date of the nomination form);
13. is not a relative of a sitting member on the Board, or Statutory Committees, related to the nomination;
14. I hereby authorize TWCU Credit Union Co-operative Society Limited to obtain a Background Check and/or Consumer Credit Bureau Report on me for purposes of verifying information I have given pursuant to my application as a nominee to serve on the relevant Board or Statutory Committee.

**[END OF SECTION – REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]**

## DECLARATION OF NOMINEE DUE DILIGENCE

Please provide all relevant information to demonstrate that you (the **NOMINEE**) are in good standing/compliant. Additional letter size (8.5 x 11) paper can be used for details if needed.

- |   | <b>Yes</b>               | <b>No</b>                |
|---|--------------------------|--------------------------|
| <p><b>In the past 10 years,</b></p> <p>(i) Have you been convicted of any criminal offence under any law in Trinidad and Tobago or elsewhere; or</p> <p><b>If yes, please provide details:</b> _____</p>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(ii) Have you been the subject of any adverse findings in civil proceedings, particularly those associated with fraud, misrepresentation, or dishonesty, under any law in Trinidad and Tobago or elsewhere; or</p> <p><b>If yes, please provide details:</b> _____</p>   | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(iii) Are you an un-discharged bankrupt or have you made a composition or arrangement with your creditors; or</p> <p><b>If yes, please provide details:</b> _____</p>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(iv) Have you been a director or person concerned in management of a business that has entered into liquidation, or been the subject of a winding up order, or had a receiver appointed in relation to the business, or entered into a composition or scheme or arrangement with its creditors while you were involved with that business or within one (1) year of that involvement; or</p> <p><b>If yes, please provide details:</b> _____</p> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(v) Have you been suspended or disbarred by a professional or any other regulatory body in Trinidad and Tobago or elsewhere; or</p> <p><b>If yes, please provide details:</b> _____</p>  | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>(vi) Have you been dismissed or asked to resign from acting as a director or in any managerial capacity, whether in Trinidad &amp; Tobago or elsewhere.</p> <p><b>If yes, please provide details:</b> _____</p>  | <input type="checkbox"/> | <input type="checkbox"/> |

**[END OF SECTION – REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]**

## Politically Exposed Persons (PEPs) Questionnaire

*This section relates to Politically Exposed Person (PEP) i.e. an individual who is or has been entrusted with prominent public functions.*

*Public Position would be a Senior Figure in the Executive, Legislative, Administrative, Military or Judicial Branches of a Government, a Senior Figure in a major Political Party or a Senior Executive of a Government-Owned Corporation or an International Organization, plus any Organization set up for the Benefit of a Senior Political Figure or a PEP.*

*PEP status itself does not, of course, incriminate individuals or entities. However, individuals who have or have had a high political profile, or hold or have held public office, can pose a higher money laundering or terrorist financing risk to institutions as their position may make them vulnerable to corruption. This risk also extends to members of their immediate families and to close associates. Consequently, this puts the candidate, into a higher-risk category.*

	Yes	No
Do you currently hold any public position?	<input type="checkbox"/>	<input type="checkbox"/>
Did you hold any public position in the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever held any public position?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have or have you had any diplomatic immunity?	<input type="checkbox"/>	<input type="checkbox"/>

***If yes to any of the above questions, please provide details:***

	Yes	No
Do you have any <i>immediate family member(s)*</i> who held public position in the past 12 months	<input type="checkbox"/>	<input type="checkbox"/>
Are you a <i>close associate**</i> of a person who held public position in the past 12 months?	<input type="checkbox"/>	<input type="checkbox"/>

***If yes, please provide details:***

*\*Immediate family members include: † A spouse or a partner (including a person who is considered by national law as equivalent to a spouse); † Children and their spouses or partners; and † Parents.*

*\*\*Close associates include: † Any individual who is known to have joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with a person who is a PEP; and † Any individual who has sole beneficial ownership of a legal entity or legal arrangement which is known to have been set up for the benefit of a person who is a PEP.*

**Declaration:** I have read the Declaration of Due Diligence Criteria above mentioned and in submitting this form; I declare that all information given in this application and in the attached documents (if any) is true and correct and that I have not willfully suppressed any material fact. I understand that any false declaration or misrepresentation may result in the rejection of the application.

**[END OF SECTION - REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]**

1. Are you currently sitting on any Board and/or Statutory Committees of any other Credit Union?

Yes       No

If yes, please provide details:

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2. Are you a delinquent in any other financial institution?

Yes       No

If yes, please provide details:

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3. Are you aware of any conflicting interest that would prevent you from properly discharging the duties of Director or Member of the Supervisory or Credit Committees of TWCU Credit Union?

Yes       No

If yes, please provide details:

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❖ I declare that the information furnished by me to TWCU Credit Union Co-operative Society Limited is true and correct and TWCU Credit Union is entitled to verify the same either directly or through any third-party agent. I also agree that, if any such declarations made by me are found to be incorrect, TWCU Credit Union shall be entitled to terminate the member's relationship. I confirm having read and understood the Bye-Laws of TWCU Credit Union, and hereby agree to be bound by its terms, conditions, and amendments.

❖ I also agree that TWCU Credit Union can disclose this application, any information contained therein, other related confidential information and transactions in this application and on accounts linked to me to law enforcement and regulatory authorities.

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE (DD/MM/YYYY)

**\*\*\* LATE APPLICATIONS WILL NOT BE ACCEPTED \*\*\***