

## Board Candidacy Application

First Name:	Last Name:	
Address:	City, State, Zip:	
Phone:	Cell Phone:	
CSA Member since:	Lodge:	
Region:	Incumbent:	□ YES □ NO
I was: □ elected □ appointed to my first term in	n the year	and have served terms.
High School attended:		City, State:
College/University attended:		Degree:
College/University attended:		Degree:
Occupation:	Employer's	Name:
Employer's Full Address:		
If retired, what was your primary occupation?		
Current social and professional organizations and	l offices held:	



What are your qualifications for this office? (Use a second sheet if necessary.)

Information provided may be printed in the Journal, except where noted.

## **Certification – Please read carefully:**

I certify that the information provided is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of information on this form or relating to my application for candidacy may result in my being denied the opportunity to run for office. I hereby authorize the Board of Directors of CSA Fraternal Life to confirm all statements contained in this application and/or resume to the extent permitted by federal, state or local law. My signature below authorizes the Board of Directors to make an investigative consumer report which contains information about my character, reputation and mode of living. I release all parties from any liability arising out of this provision and the use of such information.

If the applicant is an incumbent, the Board member must certify completion and passing of the LOMA requirement by the first day of the convention. Newly elected Board members must complete and pass the LOMA requirement to be eligible for re-election.

Signed:

Date:

Form should be returned to: CSA Fraternal Life c/o Matt Koski, Executive Secretary/COO 2050 Finley Road, Suite 70 Lombard, IL 60148

**Deadline:** <u>05</u> / <u>07</u> / <u>2018</u>