



HUGGINS CREDIT UNION CO-OPERATIVE SOCIETY LIMITED
NOMINATION PROCEDURES/GUIDELINES AND FORM - AGM 2024
SUPERVISORY COMMITTEE

NOMINATION PROCEDURES/GUIDELINES

1. Carefully read the Nomination Procedures / Guidelines and the Nomination Form.
2. All fields of the Nomination Form **MUST** be completed.
3. The Form must be signed by the **Nominee, Proposer and Seconder, all of whom must be Members of Huggins Credit Union in accordance with Bye-Law 27.1 (b) "Member in good standing" means a member who has not violated the terms of his Loan Contract neither is he delinquent nor inactive.**
4. Members shall be nominated for the Supervisory Committee **ONLY**.
5. Qualifications For Eligibility: No Member shall be eligible for nomination or election to the Supervisory Committee of Huggins Credit Union unless that person:
 - a) is a member of Huggins Credit Union
 - b) is of good standing in the society or in any other organization
 - c) is of the age of 18 years or over
 - d) is not an employee of Huggins Credit Union
 - e) is not an undischarged bankrupt
 - f) is of sound mind
 - g) has not been convicted of a criminal offence
 - h) is not a member of the Board, Credit or Supervisory Committees nor the General Manager or Internal Auditor of another Credit Union
 - i) time and commitment to serve
 - j) is in compliance with the Term Limits for Outgoing Serving Members of the Supervisory Committee

All elected officers will be required to do all such lawful things to ensure that the Huggins Credit Union achieves its objects in accordance with **BYE-LAW 27.1 and 27.2**.

6. Submit completed and signed form to Huggins Credit Union Cooperative Society Limited's by email to nominations@hugginscu.com or place a hard copy in a specially marked box at Huggins Credit Union office located at 35 Roberts Street, Woodbrook, Port of Spain in a sealed envelope addressed to:

The Secretary

Nominations Committee

Huggins Credit Union Co-operative Society Limited

35 Roberts Street, Woodbrook, Port of Spain.

7. The completed form must be submitted by 12:00 noon at the office in the drop-box and 4.00 p.m. for emailed electronic submissions by Friday 12th April, 2024.
8. Nominations submitted by **Friday 5th April, 2024** will be checked to ensure the forms have been **filled correctly**. Submissions received after that date will not be opened and checked until Friday 12th April, 2024, after 4.00 p.m.
9. **LATE and/or INCOMPLETE SUBMISSIONS WILL NOT BE ACCEPTED.**

HUGGINS CREDIT UNION CO-OPERATIVE SOCIETY LIMITED
NOMINATION FORM – AGM 2024
SUPERVISORY COMMITTEE

The Duties and Responsibilities of the Supervisory Committee are specified at Huggins Credit Union Bye-Law 29.2 and 29.3 which can be sourced at the office or online at <https://www.hugginscu.com/media-publications>.

SECTION 1. NOMINEE - AGM 2024

This section is to be completed by the Member wishing to serve.

The Nominee, the Proposer and the Secunder are required to be Members in 'good standing'.

ALL fields are mandatory.

Name of Nominee (Block letters):

Account Number:

Date of Birth: Date/Year Joined Huggins C.U.:

Residential Address:

Mailing Address if different from above:

Place of Employment:

Address:

Position held/Job Title:

Telephone No. (Home)..... (Cell)..... (Office).....

Email address:

Training:

Skills:

Experience:

- Are you a Politically Exposed Person (PEP)? Yes [] No []

If yes, please explain:

- Close associate of a Politically Exposed Person? Yes [] No []

If yes, please explain:

- Relative of a politically exposed Person? Yes [] No []

If yes, please explain:

SECTION 2. NOMINATION - AGM 2024

This Section is to be completed by the **Proposer** and **Second**

ALL fields are mandatory.

Name of Proposer (Block letters):

Account Number: Email Address:

Telephone: Office/Mobile: Date/Year Joined Huggins C.U.:

Residential Address:

Mailing Address if different from above:

Place of Employment and Address:

- Are you a Politically Exposed Person (PEP)? Yes [] No []
If yes, please explain:
- Close associate of a Politically Exposed Person? Yes [] No []
If yes, please explain:
- Relative of a politically exposed Person? Yes [] No []
If yes, please explain:

Name of Second (Block letters):

Account Number: Email Address:

Telephone: Office/Mobile: Date/Year Joined Huggins C.U.:

Residential Address:

Mailing Address if different from above:

Place of Employment and Address:

- Are you a Politically Exposed Person (PEP)? Yes [] No []
If yes, please explain:
- Close associate of a Politically Exposed Person? Yes [] No []
If yes, please explain:
- Relative of a politically exposed Person? Yes [] No []
If yes, please explain:

SECTION 3. DECLARATION

I (Name of Nominee) do declare as follows:

1. That I am duly qualified to be elected as a Member to the **SUPERVISORY COMMITTEE**
2. That:

| | | | |
|------|--|-----|----|
| i | I am a citizen of Trinidad and Tobago | Yes | No |
| ii | I am over the age of eighteen (18) years | Yes | No |
| iii | I am an employee of Huggins Credit Union | Yes | No |
| iv | I am a member of a Board or a Statutory Committee or the General Manager or Internal Auditor of another Credit Union | Yes | No |
| v | To the best of my knowledge and belief, I am in good financial standing (not delinquent or inactive) | Yes | No |
| vi | I am ' <i>an undischarged bankrupt</i> ¹ ' under the laws in Trinidad and Tobago | Yes | No |
| vii | I am certified to be insane or otherwise adjudged to be of an unsound mind | Yes | No |
| viii | I have been convicted of a criminal offence | Yes | No |
| ix | I have the time and is committed to serve | Yes | No |

I have done all such lawful things incidental or conducive to the attainment of the objects and exercise of the powers of Huggins Credit Union in accordance with BYE-LAW 3(a-d).

I make this declaration conscientiously believing the same to be true and if evidence is produced to the contrary, I understand that my nomination will be rejected.

Nominee Signature: Date:

We, the Undersigned Members of Huggins Credit Union Co-operative Society Limited do hereby nominate (Name of Nominee) as a Fit and Proper Person to serve.

Proposer Name: Signature: Date:

Seconder Name: Signature: Date:

¹ **an undischarged bankrupt** is a person who has been officially stated to be bankrupt by a court but who still has to pay his or her debts