
Application to Serve an Employee Group

This form is for extending the credit union services to an employee group in accordance with Iowa Code subsection 533.301(13) and Iowa Administrative Code subrule 189—2.11 and may not be used for extending credit union services to any other type of common bond group.

1. Credit Union Name:

2. Credit Union Address:
City
State
Zip

3. Name of Employee Group:

4. Employee Group Address:
City
State
Zip

5. Name and title of Employee Group representative requesting credit union service for the employee group members covered by this application:

Name:

Title:

6. Estimated number of potential members through this employee group

7. Briefly describe the method used to determine the employee group's interest in joining the credit union:

Signature of credit union official completing the form

Signature of Employee Group Representative

APPROVED

DISAPPROVED

Signature of Superintendent, Division of Credit Unions

Date