

ORGANIZATIONAL PROFILE

Company Name: _____

Address: _____

Phone: _____ Website: _____

Point of Contact: _____

Contact Phone: _____ E-mail: _____

Legal Status of Company:

☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ LLP or LLC

Number of Years in Operation: _____ Number of Employees: _____

Has the company ever been partnered with another credit union?

☐ Yes ☐ No If No, please continue to question 6. If Yes, please provide

the following:

a) Name of the other credit union: _____

b) Is the company still affiliated with that credit union: ☐ Yes ☐ No

c) If no longer affiliated, when was the relationship terminated? _____

d) Reason for termination: _____

Does the company have any out-of-state office? ☐ Yes ☐ No

What are the standard days and hours of operation? _____

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Does the company offer direct deposit and/or payroll deduction through the Automated Clearing House (ACH)

☐ Yes ☐ No

Will the company provide direct deposit and/or payroll deduction to credit union members through Foothill Federal Credit Union?

☐ Yes ☐ No

What is the payroll frequency? _____

Will the company promote the credit union as part of its benefit package?

☐ Yes ☐ No

Will the company promote the credit union by allowing the distribution of credit union materials throughout the year?

☐ Yes ☐ No

Does the company offer "new employee orientation meetings"?

☐ Yes ☐ No

Who will be the designated contact employee regarding credit union membership?
Name and title: _____

Could a credit union representative occasionally visit and distribute credit union materials to employees?

☐ Yes ☐ No

How did you learn about Foothill Credit Union?
