

Federal Credit Union Proof of Concept Form

Indicates required field

OMB Control Number 3133-0202

Note, closing this window at any time prior to submission will result in the loss of content entered.

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Introduction

Phase One of the proposed new credit union charter process consists of identifying a viable Field of Membership (FOM). If you need assistance at any point during this process, please contact dcamail@ncua.gov

Primary Organizer Information

First Name:

Last Name:

Email Address:

Phone Number:

Address:

City:

State:

Zip Code:

Secondary Organizer Information (Optional)

First Name:

Last Name:

Email Address:

Phone Number:

Address:

City:

State:

Zip Code:

Proposed Federal Credit Union (PFCU) Profile Basics

First Choice

PFCU Name:

Second Choice

PFCU Name:

State:

Region: (auto populates)

Field of Membership

Items in Red DO NOT appear in the form. These comments provide the reviewer with information on how the form will flow.

(NOTE- The field of membership section is being redesigned. It will be a dynamic form within the system which uses conditional logic that adapts to user input, showing or hiding fields/modules based on previous answers. This personalized experience streamlines the completion of the form and improves user engagement. The system will also provide guidance to assist organizers with understanding of the requirements better than the current online submission form. In addition, fields requiring completion will be based on field of membership type.)

Select the category that best describes your proposed FOM:

- An area defined by a geographic boundary (System will proceed to the Community field of membership module)

- Members and/or employees of one or more occupational and/or associational group(s)
(System will proceed to the Common Bond field of membership module)

1) Option 1-Field of Membership-Community Module

Field of Membership - COMMUNITY
Complete all questions to describe your proposed Community Field of Membership.

1. Describe the geographic boundaries of your community.*

2. Select the best option to describe your community. (Must be a contiguous geographic area.)*

City, county, or political equivalent (proceed to map question)

Census Tracts (answer additional Census Tracts question then proceed to map question)

If Census Tracts is selected above, answer the following question:
Please upload the census tracts information to define your community.*

A list of any uploaded files will be displayed

3. Please provide a map illustrating the geographic boundary of your community.*

A list of any uploaded files will be displayed

4. What is the current population of your community?*

5. Is your community a rural district?*

No

Yes

If Yes is selected above, answer following Rural District questions.

Describe the rural district.*

What is the land area (in square miles)?* This will be used to calculate population density.

System should throw error if pop/sq mile exceeds threshold for rural district designation.

6. If you qualify, do you want a Low Income Designation (LID)?*

Yes

No

Example of proposed Field of Membership language:

2) Option 2-Field of Membership-Common Bond Module

Complete all questions to describe your Single Common Bond or Multiple Common Bond proposed field of membership.

1. Which of the following make up your proposed field of membership?*

Members and/or employees of an occupational or associational group (A Single Common Bond)
Select the type of single common bond that describes your field of membership

Occupation Trade, Industry or Profession (TIP)
If TIP is selected, cannot add additional groups to FOM

Association

OPTIONAL: and Members and/or employees of additional occupational and/or associational group(s) (Multiple Common Bond)
Select the types of common bond that make up your field of membership (may choose both)

Occupation

Association

System will proceed to either occupational, associational, TIP module

1) Occupational Module

Field of Membership - COMMON BOND (continued)
OCCUPATIONAL MODULE (system will present more than once if organizer indicated MCB with more than one occupational group)

1. What is the name of the company (occupational group)?*

2. Where is the company (occupational group) located?*

If Multiple Common Bond was indicated in Section 4 b Q1, system present following

Where will the credit union service facility be located?*

What is the distance between company location and credit union service facility locati

3. How many employees does the company (occupational group) have?*

Following box will only appear if MCB and 5000 or more employees

If MCB and 5000 or more employees, must answer FOM overlap question

Is this group in the FOM of another credit union?*

Yes
 No

If yes, provide letter from the credit union.

A list of any uploaded files will be displayed

4. Which clause best describes the field of membership for your proposed federal credit union? Select one.*

Employer located in [location], has multiple work locations, and all employees are paid from [location].

Employer located in [location], has multiple work locations, all employees may not be paid from [location], but all employees are supervised from [location].

Employer located in [location], has multiple work locations, but employees (not working in [location]) are either paid from, or are supervised from [location].

Employer located in [location], has multiple work in, paid from, and supervised from locations, but all employees are considered headquartered in [location].

Employees working at, and students attending (except pre-kindergartners), a particular school or school district with the goal of obtaining a diploma/degree.

Students (except pre-kindergartners) attending a particular school or school district with the goal of obtaining a diploma/degree.

Board of Directors of [Company Name] located in [location].

Board of Directors and officers of [Company Name] in [location].

Employees and the Board of Directors of [Company Name] who work in [location].

Employees and the Board of Directors of [Company Name] who work in or are paid from [location].

Employees and the Board of Directors of [Company Name] who work in or are paid or supervised from [location].

5. Please upload the Sponsor Letter from the company (occupational group).*

A list of any uploaded files will be displayed

2) Associational Module

ASSOCIATIONAL MODULE (system will present more than once if organizer indicated MCB with more than one associational group)

1. What is the name of the association?*



2. Was the association formed primarily for the purpose of expanding credit union membership?


Yes No

3. Where is the association headquarters located?*




If Multiple Common Bond was indicated in Section 4 b Q1, system present following

Where will the credit union service facility be located?*



What is the distance between association location and credit union service facility loc:




4. The associational common bond for the proposed federal credit union is best described as a(n):*

- Alumni association
- Religious organization, including churches or groups of related churches
- Electric cooperative
- Homeowner's association
- Labor union
- Scouting group
- Parent teacher association (PTA) organized at the local level to serve a single school district
- Chamber of commerce group (members only and not employees of members)
- Athletic booster club whose members have voting rights
- Fraternal organization or civic group with a mission of community service whose members have voting rights

(System only display following question when this option is selected)


Please provide supporting evidence of how association provides community service.

A list of any uploaded files will be displayed 

- Organization having a mission based on preserving or furthering the culture of a particular national or ethnic origin

(System only display following question when this option is selected)


Please provide supporting evidence of how association preserves or furthers the culture of a particular national or ethnic origin.

A list of any uploaded files will be displayed 

- Organization promoting social interaction or educational initiatives among persons sharing a common occupational profession

(System only display following question when this option is selected)

Please provide supporting evidence of how association promotes social interaction or educational initiatives for persons sharing a common occupational profession.

A list of any uploaded files will be displayed 

Continued:

Other

(System only display following Totality of Circumstances questions when Other is selected)

Totality of Circumstances

Please answer the following questions about your association.

Do members participate in the furtherance of the goals of the association?*

- Yes
 No

Please provide examples of how the members participate in the furtherance of the goals of the association.*

Does the association maintain a membership list?*

- Yes
 No

Please explain.*

Does the association sponsor activities?*

- Yes
 No

Please provide examples of activities the association sponsors.*

Does the association have an authoritative definition of who is eligible for membership?*

- Yes
 No

Please provide the authoritative definition of who is eligible for membership (e.g., bylaw section reference).*

Do members pay dues?*

- Yes
 No

Please provide the amount each member is required to pay in dues.*

Do members have voting rights?*

- Yes
 No

Please explain the membership's voting rights.*

Does the association hold periodic member meetings?*

- Yes
 No

Please explain.*

Does the group and the proposed federal credit union operate in a way that demonstrates the separate corporate existence of each entity?*

- Yes
 No

Please explain.*

Must the member buy a product or purchase a service in order to join the association or club (client-customer relationship)?*

- Yes
 No

Please explain.*

Please provide supporting evidence, if applicable, for the association details described above.

A list of any uploaded files will be displayed

Continued:

5. Please provide a copy of the Articles of Incorporation for the Association, or other acceptable verification of the formation of the Association.

Upload

A list of any uploaded files will be displayed

6. Please provide a copy of the approved bylaws of the Association.*

Upload

A list of any uploaded files will be displayed

7. When were the Association's bylaws approved?*

DD/MM/YYYY

8. How many primary potential members does the association currently have?*

[Number of Members]

If MCB and 5000 or more members, system display overlap question

If MCB and 5000 or more employees, must answer FOM overlap question

Is this group in the FOM of another credit union?*

- Yes
 No

If yes, provide letter from the credit union.

Upload

A list of any uploaded files will be displayed

9. Select the clause that best describes the FOM for your proposed federal credit union. (The system will present one of the following sets of FOM clauses based on the type of association selected in Q4.)

If Alumni, Electric Coop, Homeowners (HOA), Labor Union, Scouting, Chamber of Commerce, Cultural or Ethnic, Professional or Other was indicated in Q4, system will present the following FOM options.

Association Field of Membership (FOM)

This field of membership language applies to Alumni, Electric Coop, Homeowners (HOA), Labor Union, Scouting, Chamber of Commerce, Cultural or Ethnic, Professional, and Other types of associations.

Select the clause that best describes the Field of Membership for your proposed federal credit union:*

- Members of [Association Name] in [location] who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date (or bylaws date if Assoc. Type is Other)].
- Employees and members of [Association Name] in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date (or bylaws date if Assoc. Type is Other)].
- Voting members of [Association Name] in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date (or bylaws date if Assoc. Type is Other)].
- Employees and voting members of [Association Name] in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date (or bylaws date if Assoc. Type is Other)].

Continued:

If Religious organization, including churches or groups of related churches was indicated in Q4, system will present the following FOM options:

Faith-based Association Field of Membership (FOM)
This field of membership language applies to faith-based associations

Select the clause that best describes the field of membership for your proposed federal credit union:*

- Members of [Association Name] located in [location].**
This clause allows the credit union to serve members and employees of a faith-based organization (church, temple, synagogue, mosque, etc.).
- Employees and members of [Association Name] located in [location].**
This clause allows the credit union to serve members and employees of a faith based organization (church, temple, synagogue, mosque, etc.).
- Members of [Association Name] and students attending [School Name] located in [location].**
This clause allows the credit union to serve members of a faith based organization and students attending a school of the faith based organization.
- Employees and members of [Association Name] and students attending [School Name] located in [location].**
This clause allows the credit union to serve members and employees of a faith-based organization and students attending a school of the faith-based organization.

If you selected a FOM that includes students attending a school, what is the name of the school?

If Parent Teacher Association (PTA) was indicated in Q4, system will present the following FOM options:

Parent Teacher Association (PTA) Field of Membership (FOM)
This field of membership language applies to PTAs.

Select the clause that best describes the field of membership for your proposed federal credit union:*

- Members of [Association Name] (local PTA chapter) in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date].**
This clause allows the credit union to serve all members of the local chapter of the association (includes all classes of members who participate in the furtherance of the association's goals).
- Employees and members of [Association Name] (local PTA chapter) in [location], who qualify for membership in accordance with its charter and bylaws in effect on [bylaws date].**
This clause allows the credit union to serve all members of the local chapter of the association as well as the employees of the local chapter of the association (includes all classes of members who participate in the furtherance of the association's goals).

If Athletic Booster Club, Fraternal or Civic Association was indicated in Q4, system will present the following FOM options:

Athletic Booster Club, Fraternal or Civic Association Field of Membership (FOM)
This field of membership language applies to Athletic Booster Club, Fraternal or Civic associations.

Select the clause that best describes the field of membership for your proposed federal credit union:*

- Voting members of [Association Name] in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date].**
This clause allows the credit union to serve only members of the association that have voting rights or vote for a delegate who in turn represents the members' interests.
- Employees and voting members of [Association Name] in [location], who qualify for membership in accordance with its charter and bylaws in effect on [FOM Preliminary Approval Date].**
This clause allows the credit union to serve only the members of the association that have voting rights or vote for a delegate who in turn represents the members' interests and also the association's employees.

10. Please upload the Sponsor Letter from the Association.*

A list of any uploaded files will be displayed

3) TIP Module

TRADE, INDUSTRY OR PROFESSION (TIP) MODULE

1. Please define the TIP that your proposed federal credit union would serve.*
2. How will credit union membership eligibility be determined?*
3. What geographic limitations apply to your TIP?*

Additional module if multiple common bond field of membership (Underserved Area):

ONLY FOR Multiple Common Bond FOM [Complete the following information for each underserved area]

Does your field of membership include an underserved area?*

Yes

No

If "yes" is selected, answer the following questions about the underserved area.

Please describe the proposed underserved area being requested.*

[Identify the census tracts of the underserved area] Text field, and must include list of the numbers of the census tracts (each is 11 digits long - have system validate!)
NOTE: can be 100s of tracts, system must support! (alternatively, can upload

Please upload the census tracts information to define the undersaved area.*

Upload Upload a spreadsheet list of the numbers of the census tracts

A list of any uploaded files will be displayed

Please provide a map demonstrating the geographic boundaries of the proposed underserved area.*

Upload

A list of any uploaded files will be displayed

What is the population of the proposed underserved area?*

Please provide the source of the population data.*

How does the area qualify as a Local Community or Rural District?*

[state how the area qualifies – e.g., "The proposed area qualifies as a well-defined local community as it is a contiguous portion of a single political jurisdiction (County/City, etc., State)]

Capital Planning

What's your plan for obtaining donated capital?

State the total estimated amount of donated capital?

Describe how you arrived at this number (for the total estimated amount of donated capital).

How many years of support do you expect from your sponsor? Describe the type of ongoing support you expect.

Please provide any letters of commitment for sources of donated capital (Letters of commitment for capital are optional for Phase One. This will be required later if the application proceeds.).

- (upload button)

Research Certification

Did the organizers conduct extensive research into credit unions and the rules and regulations that govern them? Research should include, at a minimum, the following:

- The NCUA Regulations, with particular attention to Part 701 - Organization and Operation of Federal Credit Unions; (hyperlinked)
- Appendix B to Part 701 of the NCUA Regulations - the Chartering and Field of Membership Manual; (hyperlinked) and
- The NCUA Learning Management Service (LMS) materials (log-in will be required on the LMS' main page under "Account Access"). (hyperlinked)

Research Self-Certification

I have reviewed and am familiar with the NCUA documents outlined in NCUA's Federal Credit Union Charter Application Guide. In addition, I am familiar with the regulatory and consumer requirements for chartering and operating a federal credit union. I have researched requirements for the following:

- Credit union rules and regulations (hyperlinked above)
- Low-income designation (hyperlinked above)