


Nomination form
(Quebec Caisses)

Received by (initials)	Date (YYYY-MM-DD)



- Please fill out all sections of this form and provide a copy of your résumé along with the ID required.
- Make sure your application is complete before sending it to the caisse.

Name of caisse

As specified in the call for nominations, you have until _____ on _____ to submit your nomination form to the secretary of your caisse's board of directors.

(time) (date)

Nominee

I, the undersigned, _____, _____, _____,

(candidate's name) (occupation)

at _____, a full member¹ of the caisse, would like to be a director.

(employer, if applicable)

If seats on the board are allocated by group, check the group you represent below:

<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____

I have been nominated² by _____, a full member of the caisse.

This nomination is for valid for the caisse's annual general meeting, which will be held on _____.

Signed at _____, on _____.

X _____ (candidate's signature)	X _____ (nominator's signature)
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¹ You must be a full member and meet the eligibility requirements on the date of the general meeting.

² If the nominator is a representative of a legal person, which includes partnerships, that is a member of the caisse, the documents naming the person as such must accompany the nomination form. The nominator is not required to be a member of the group the candidate is being nominated to represent, **unless** the caisse bylaws specify that candidates for reserved seats must be elected by members of each of these groups.

Purpose: Verify eligibility and integrity of a candidate applying to be a director

Section A: Eligibility – The questions below are used to determine your eligibility	Check ✓
1. Do you meet the eligibility requirements set out in the <i>Act Respecting Financial Services Cooperatives</i> (see section 227 on back) and the caisse bylaws? (section 6.1) If you answered “NO,” you are not eligible to be a caisse director.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you a former Desjardins employee (caisse, centre, Federation or other component) whose employment ended within five years of the date of the annual general meeting (see section on back). If you answered “YES,” you are not eligible to be a caisse director.	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you hold a position that conflicts with the position of caisse director as described in the <i>Desjardins Group Code of Professional Conduct?</i> (See section 7 on back) If you answered “YES,” you are not eligible to be a caisse director.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section B: Integrity – The questions below are used to assess your integrity	Check ✓
1. Have you ever been found guilty of a penal or criminal offence for which you have not received a pardon/record suspension , or are you subject to ongoing penal or criminal proceedings (e.g., offences related to dishonesty, fraud, theft, misappropriation of assets or funds, money laundering, terrorist activity financing or other similar offences)?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No
2. Are you or have you ever been subject to civil proceedings based in whole or in part on a case of fraud, theft, deceit, false or misleading information, conspiracy, breach of trust, breach of fiduciary duty, insider trading or any other similar allegation or action?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No
3. a) Have you ever engaged in conduct that adversely affected your financial situation (e.g., financial difficulties leading to legal proceedings, bankruptcy, insolvency, filing of a proposal, repossession of property by a creditor, hypothecary recourse, etc.)? b) Have you ever engaged in conduct that adversely affected the financial situation of a company that you worked for or for which you were a director (e.g., actions or duties performed which led to legal proceedings, bankruptcy or insolvency of the company)?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No
4. Have you ever been accused or convicted of an offence involving tax laws (e.g., fraud, tax evasion, refusal to file an income tax return)?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No
5. Have you ever been penalized or declared incompetent or accused of improbity (unethical behaviour) by a regulatory or public authority or any self-regulating organization while carrying out duties similar to those of a caisse director?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No
6. a) Has a previous employer ever dismissed you for having breached legal, ethical or regulatory frameworks? b) Has a professional association that you're a member of ever imposed penalties or taken disciplinary action because you breached your professional obligations?	<input type="checkbox"/> Yes ¹ <input type="checkbox"/> No

¹ If you answered “YES” to any of the questions in **section B**, please provide the caisse, under separate cover, all details and documents that the caisse could use to assess your file.

Required checks

Before you take office and during your mandate, the Fédération des caisses Desjardins du Québec (Federation), acting as the mandatary of your caisse, must conduct background checks on you as a candidate for the position of caisse director. These checks determine whether you meet the eligibility requirements set out in the *Act Respecting Financial Services Cooperatives* or the caisse bylaws, if applicable, as well as the integrity criteria described in the Autorité des marchés financiers's *Guideline Governing Integrity and Competency Criteria*.

Therefore, in order to allow the Federation or its authorized mandataries to conduct the required checks, you must fill out any consent forms required for background and credit checks.

_____ I have read and understood the information outlined above and will take the necessary steps for the required checks.
(initials)

Eligibility requirements

EXCERPT FROM THE ACT RESPECTING FINANCIAL SERVICES COOPERATIVES

Section 227:

A natural person who is a member of the credit union may be a member of its board of directors (...), unless that person is disqualified for office as a member of such boards.

In addition to persons disqualified for office as directors under the Civil Code, and persons convicted of an offence or an indictable offence involving fraud or dishonesty who have not obtained a pardon, the following persons are disqualified for office as members of a board:

- 1) a member who has been a member for less than 90 days, unless he or she is a founder
- 2) an auxiliary member
- 3) the chief manager of the credit union or another of its employees, or an employee of the federation, where applicable, or of another legal person or partnership belonging to the financial group
- 4) (...)
- 5) an officer or employee of another credit union
- 6) a person dismissed in the past five years under section 118, 118.2 or 335

EXCERPT FROM THE CAISSE BYLAWS

Section 6.1:

BOARD MEMBER QUALIFICATIONS

In addition to the exceptions under the Act, any natural person who is a caisse member may not serve as a board member if they:

- a) are not a Canadian citizen, resident or landed immigrant
- b) have ever had their membership revoked by a caisse belonging to the Groupe coopératif Desjardins
- c) are a director who has served a three-year term without completing the mandatory training during their term

EXCERPTS FROM THE DESJARDINS GROUP CODE OF PROFESSIONAL CONDUCT

Note: When reviewing the nominations, the caisse will check that the candidate doesn't hold a position that conflicts with the section of the *Desjardins Group Code of Professional Conduct* cited below:

Section 3.4: Ineligibility of former employees of a Desjardins component

As a former employee of a Desjardins component, you are not eligible to sit on the board of directors of a caisse for five years following the end of your employment. This period of ineligibility does not apply if you worked for 420 hours or less per year with a Desjardins component

Section 7: Incompatible duties

An director may not perform an activity or hold a position or a job with a competitor if doing so places them in a position that may prejudice the interests of Desjardins or a component of Desjardins. "Competitor" refers to any person other than a component that manufactures, offers or distributes products or services to the same clientele in competition with the financial or other activities of Desjardins.

It is the responsibility of the board of directors of the component, on the advice of the designated authority on ethics and professional conduct, to assess the level of competition and the risk of prejudice that situations involving directors represent.

If you have any questions about your eligibility for a board position,
please contact your caisse's general manager.

Additional information

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	Candidate's name
Age group	
<input type="checkbox"/> 18-34 <input type="checkbox"/> 35-49 <input type="checkbox"/> 50-64 <input type="checkbox"/> 65 and older <input type="checkbox"/> I prefer not to answer	
Do you identify as someone from a cultural community?	
<input type="checkbox"/> No <input type="checkbox"/> Yes, specify: _____ <input type="checkbox"/> I prefer not to answer	


Do you represent a geographic area specified in the call for nominations? (visit the caisse’s website if needed)

<input type="checkbox"/> No <input type="checkbox"/> Yes, specify:	
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____

Professional skills

	Level of expertise		
	Yes	Some	None
<input type="checkbox"/> Customer service (member/client experience)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cooperatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Financial management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Business management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Law/ethics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> HR management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> IT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Motivation for applying and contribution to the caisse’s enhanced group profile

 Your candidate profile should be no more than 500 words. Your candidate profile will be published on the caisse’s website. The idea is to let members get to know all the candidates before the general meeting. The caisse may also ask to publish your photo.

In this section (max. 500 words):

1) Explain why you’re applying for this position

2) Demonstrate how your background matches what the board is looking for

To ensure the accuracy of the information provided, please write LEGIBLY IN BLOCK LETTERS and complete all sections of this form.

Section 1 PERSONAL INFORMATION			
First name (as written on ID)		Family name (as written on ID)	
Other current or former first name(s)		Other current or former family name(s)	
Home phone	Phone number (secondary)	Extension	Email address
Position to be filled		Address of main workplace (if available)	

► Date of birth

City	Province	Country	Date of Birth
			Y Y Y Y M M D D

► Current address

Unit no.	Building no.	Street	Postal code	City
Province		Country	From: Y Y Y Y M M D D	To: Y Y Y Y M M D D

► Former address (if at current address for less than three years)

Unit no.	Building no.	Street	Postal code	City
Province		Country	From: Y Y Y Y M M D D	To: Y Y Y Y M M D D

Unit no.	Building no.	Street	Postal code	City
Province		Country	From: Y Y Y Y M M D D	To: Y Y Y Y M M D D

► Country of residence (more than six months in the last ten years)

Country	From: Y Y Y Y M M D D	To: Y Y Y Y M M D D
Country	From: Y Y Y Y M M D D	To: Y Y Y Y M M D D

► AMF or NRD client no. or other license (mandatory for persons requiring a license to do their job)

AMF client no.	NRD client no.	Other type of license	No.

Section 2 INFORMATION PERTAINING TO CONSULTANTS AND SUPPLIERS

► Complete this section if the person subject to the security investigation is from outside the organization

Company name	Duration of mandate (if known)
	From: Y Y Y Y M M D D To: Y Y Y Y M M D D
Description of mandate	

Section 3 CRIMINAL RECORD

The existence of a criminal history will not necessarily rule out the possibility of a future relationship with Desjardins Group, depending on the nature of the relationship. Details of all convictions based on the criteria listed below are necessary to confirm the accuracy of your file and analyze it.

You must only declare the adult convictions constituting a violation of the *Criminal Code of Canada* and other Canadian federal laws for which you haven't been granted a record suspension or a pardon.

Do not declare: Conviction(s) for which you have been granted a record suspension or a pardon under the *Criminal Records Act*; conviction(s) when you were considered a "teenager" under the *Youth Criminal Justice Act*, the *Young Offenders Act* and the *Juvenile Delinquents Act*; absolute or conditional discharge(s) (in compliance with Section 730 of the *Criminal Code of Canada*); charge(s) for which you were found not guilty; any charge(s) for breach(es) in provincial laws or municipal regulations; and any accusation(s) from outside Canada.

Have you ever been found guilty of a criminal offence in Canada and for which you have not been granted a pardon?
☐ Yes ☐ No If yes, please provide additional information (charge(s), name of police force, city, date of conviction)

Charge	Name and city of police force	Date of conviction
		Y Y Y Y M M D D
Charge	Name and city of police force	Date of conviction
		Y Y Y Y M M D D

X

Signature of the person subject to the investigation

Date (YYYY/MM/DD)

Section 4**CONSENT**

You have been identified as a person who: wants to get a job (or is already at a job); is an employee of a company about to execute a contract; wants to obtain a contract or act as officer within Desjardins Group¹.

Desjardins Group has mandated SterlingBackcheck Canada Corp. and its subsidiaries and affiliated companies (hereinafter "SBC") to carry out an enhanced police information check (E-PIC). An E-PIC is a search in the national depository of criminal records held by the Royal Canadian Mounted Police (RCMP) and in the local databases of police forces across Canada. This investigation is carried out by a Canadian police force on behalf of SBC using ID, investigation and criminal information databases accessible via the Canadian Information Police Centre and from the following information: name, sex, date and place of birth and declared criminal record. To find out more about the E-PIC check, visit http://backcheck.net/docs/supplemental-information-sheet-e-pic-fr_2014-04-01.pdf.

SBC and the police forces cannot process all requests. If for any reason whatsoever the SBC is unable to complete this investigation, particularly if they are unable to confirm your identity, you will be directed to your local police for an in-person investigation. If the information you've provided herein does not match the information gathered from the investigation, or if the results of the investigation are inconclusive, you may obtain a certified criminal record check from the RCMP in order to settle any misunderstanding or dispute.

Under certain conditions, you have the right to consult your personal information and to request changes by showing proof that the information is inaccurate, incomplete, ambiguous or outdated. You have the right to withdraw your consent at any time. You also have the right to ask questions or file a complaint regarding how the SBC has handled your personal information. You can find the details of SBC's personal information security and protection practices and find out how to contact SBC at: <http://www.sterlingbackcheck.ca/About/Privacy.aspx>.

Consent

I consent to having a credit check and security investigation carried out on me, in compliance with the applicable laws, regulations and guidelines. The goal of this investigation is to confirm that I meet Desjardins Group's requirements based on the nature of my current or future relationship with Desjardins.

I give consent to the Fédération des caisses Desjardins du Québec (FCDQ) and its duly authorized agents, including SBC, to gather, use and disclose to the RCMP, any Canadian police force, any financial institution, any personal information agent and any employer, my personal information which they deem necessary, including information on any criminal record, to carry out this investigation. I also consent to the persons who have been contacted as part of this investigation sharing this information to the FCDQ and its agents.

I acknowledge that I have read the SBC's confidentiality policy and agree to the gathering, use and disclosure of my personal information as described above. I confirm that the information I've provided herein is, to my knowledge, complete and accurate, and I understand that providing inaccurate, incomplete and misleading information may result in a negative assessment. I release Desjardins Group, SBC, their agents, and any person or organization that provides the information required under this investigation, from all responsibilities, including any prejudice, damage or loss that may result from the sharing of the information requested, their use and results of the investigation.

I authorize the gathering of information for the purposes of verification and analysis. I also certify that, to my knowledge, the information provided on this personal information disclosure form is true and accurate.

X

Signature of the person subject to the investigation

Date (YYYY/MM/DD)

¹ All Desjardins Group components, in particular, but without limiting the general scope of the foregoing, the Fédération des caisses Desjardins du Québec, the Fédération des caisses populaires de l'Ontario Inc., their member caisses and their centres.

Section 5**ID VERIFICATION****TO BE COMPLETED BY THE DESJARDINS GROUP REPRESENTATIVE OR PROVIDER**

ID verification is MANDATORY for verifying a Canadian criminal record.

Please note that ID and digitized information are only used for identification purposes.

Two (2) legible identification documents are required:

The first ID must be government-issued and must include the name, date of birth and photograph of the person subject to the investigation (e.g., driver's license, passport, citizenship card or Certificate of Indian Status).

The second ID must ideally be government-issued and must include at least the name of the person subject to the investigation.

REMINDER: The two identification documents must be digitized and included with this consent form.

I, the undersigned, _____, have verified the ID of _____ and confirm
Name of representative in block letters Name of person subject to the investigation in block letters
that the person subject to the investigation and the person appearing on the ID are one and the same person. The witness must sign at the bottom of this page to confirm their verification.

X

Signature of Desjardins Group representative or provider confirming the identify and certifying the signature of the person subject to the investigation

Date (YYYY/MM/DD)