APPLICATION FORM

Canada Development Education (CanadaDE) – Credit Union Leadership Program 2026.

September 13–18, 2026 in Halifax, Nova Scotia, Canada

Title (Mr./Ms./Mrs./Other): _____

Name as Appeared in Passport: _____

Name Preferred on Name Badge: _____

Name in the Certificate: _____

CU Name: _____ Your Position in CU: _____

Organization Address: _____

E-mail: _____ Phone: _____

Country: _____

The Federation your Credit Union is Affiliated: _____

Number of Years in CU Movement or Development work: _____

Are you an ACDE Graduate? ☐ Yes ☐ No

If Yes: Batch / Year:_____

Please briefly explain why you wish to participate in the CanadaDE Leadership Program and how it will benefit your organization and the credit union movement in your country.

_____

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_____

Signature of Applicant: _____

Date: _____

5th Floor FSCT Building, No. 199, Nakornin Rd. (Rama V),
Bangsrithong Sub-District, Bangkruay District,
Nonthaburi Province 11130, THAILAND
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E-mail: accumail@aaccu.coop www.aaccu.coop

Recommendation of League /Federation

_____

_____

Date _____

Signature of CEO or General Manager Federation

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