



# Application to serve on the Academic Research Council (ARC)

OMB No: 3170-0037  
Expiration: 09/30/2019

Thank you for your interest in a position as a representative on the Academic Research Council (ARC) of the Consumer Financial Protection Bureau (CFPB). Please complete and submit this questionnaire as part of the application and selection process for the ARC. CFPB may use this information to perform a background check, conduct a conflict of interest review, and perform other similar due diligence activities associated with your application and possible selection as a representative on the ARC. CFPB will use the information you provide only for those purposes authorized by law, or as outlined under the attached Privacy Act Statement. Please ensure that all information you provide is complete and accurate.

## General information

1 Please provide your personal information

FIRST NAME	LAST NAME		M.I.
<input type="text"/>	<input type="text"/>		<input type="text"/>
EMAIL	CURRENT PRINCIPAL EMPLOYER		
<input type="text"/>	<input type="text"/>		
EMPLOYER'S ADDRESS	CITY	STATE	ZIP CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
POSITION/TITLE	HOW LONG AT EMPLOYER		
<input type="text"/>	<input type="text"/>	YR	<input type="text"/>
			MO
WORK PHONE	CELL PHONE		
<input type="text"/>	<input type="text"/>		
PLACE OF BIRTH	DATE OF BIRTH		
<input type="text"/>	<input type="text"/>		
GENDER			
MALE	FEMALE	PREFER NOT TO ANSWER	OTHER <input type="text"/>

## Experience

2 List your business or professional experience not listed on your résumé/CV

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3 List any Federal advisory committee or any board on which you are currently a member and the number of years you have served on that committee or board if these details are not fully listed on your résumé/CV.

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4 List any financial institutions you have worked at or been professionally affiliated with not listed on your résumé/CV.

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5 List other affiliations and/or service as a community leader that would benefit you in your role as a member of the advisory group

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**Personal history**

- |   |   |     |    |
|---|---|-----|----|
| 6   | <b>Have you ever been convicted of a felony (a felony is defined as any violation of law punishable by imprisonment longer than one year)?</b>  | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |
| 7   | <b>Are you a US citizen?</b>  | YES | NO |
| If no - are you a permanent resident (i.e. possess a green card)? |   |     |    |
| YES   |   | NO  |    |
| 8   | <b>Have you been a party to a civil or criminal action involving a financial institution or service provider?</b>   | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |
| 9   | <b>Are you now or have you in the last year been subject to the registration and reporting requirements of the Lobbying Disclosure Act (2 U.S.C. 1605)?</b>   | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |
| 10  | <b>Are you currently engaged in any business before the CFPB?</b>   | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |
| 11  | <b>Have you failed to pay any tax, penalty, or interest liability during the current or last three calendar years within forty-five (45) days of the date of which the IRS gave notice of the amount due and request for payment?</b> | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |
| 12  | <b>Have you now or ever been under investigation by the IRS for possible criminal offenses?</b>   | YES | NO |
| If yes - please explain on the attached continuation sheet.       |   |     |    |

## Continuation sheet to form

If you need more space for an answer, use this sheet. Please number each answer to correspond to the number on this form. When you have completed your answers, attach to this form.

FIRST NAME

LAST NAME

M.I.

CONTINUATION FIELD (IF NEEDED)

## Privacy Act Statement

The information that you provide will be used by the Consumer Financial Protection Bureau (CFPB) to determine qualifications, suitability, and availability for service on advisory boards, bodies, panels, committees or other similar groups. The information will be used to conduct background clearances and/or for annual reports on advisory boards, bodies, panels, committees or other similar groups. The information will be used by and disclosed to employees, contractors, agents, and others authorized by the CFPB to receive this information to assist in related activities. The information may also be disclosed to:

1. Appropriate agencies, entities, and persons when: (a) the CFPB suspects or has confirmed that the security or confidentiality of information in the system of records has been compromised; (b) the CFPB has determined that, as a result of the suspected or confirmed compromise, there is a risk of harm to economic or property interests, identity theft or fraud, or harm to the security or integrity of this system or other systems or programs (whether maintained by the CFPB or another agency or entity) that rely upon the compromised information; and (c) the disclosure made to such agencies, entities, and persons is reasonably necessary to assist in connection with the CFPB's efforts to respond to the suspected or confirmed compromise and prevent, minimize, or remedy such harm;
2. Another federal or state agency to (a) permit a decision as to access, amendment or correction of records to be made in consultation with or by that agency, or (b) verify the identity of an individual or the accuracy of information submitted by an individual who has requested access to or amendment or correction of records;
3. To the Office of the President in response to an inquiry from that office made at the request of the subject of a record or a third party on that person's behalf;
4. Congressional offices in response to an inquiry made at the request of the individual to whom the record pertains;
5. Contractors, agents, or other authorized individuals performing work on a contract, service, cooperative agreement, job, or other activity on behalf of the CFPB or Federal Government and who have a need to access the information in the performance of their duties or activities;
6. The U.S. Department of Justice ("DOJ") for its use in providing legal advice to the CFPB or in representing the CFPB in a proceeding before a court, adjudicative body, or other administrative body before which the CFPB is authorized to appear, where the use of such information by the DOJ is deemed by the CFPB to be relevant and necessary to the litigation, and such proceeding names as a party or interests: (a) The CFPB; (b) Any employee of the CFPB in his or her official capacity; (c) Any employee of the CFPB in his or her individual capacity where DOJ has agreed to represent the employee; or (d) The United States, where the CFPB determines that litigation is likely to affect the CFPB or any of its components;
7. To the public in the form of names, affiliations, and other pertinent biographical information of board or committee members; and
8. Appropriate agencies, entities, and persons to the extent necessary to obtain information relevant to making a determination of whether an individual is eligible to serve on a CFPB board or committee.

The collection of this information is authorized by Pub. L. No. 111-203, Title X, sections 1011, 1012, 1014, codified at 12 U.S.C. §§ 5491, 5492, 5494. Providing your identifying information is voluntary, but not doing so may result in non-selection of a prospective advisory board, body, panel, committee, or other similar group membership. However, failure to provide your Social Security number may not be the reason for non-selection.

The Bureau has a special interest in ensuring that women, minority groups, and individuals with disabilities are adequately represented on the Board and Councils, and therefore, encourages applications from qualified candidates from these groups. In furtherance of this interest, the Bureau invites applicants to the Board and Councils to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not disqualify you from consideration for service on the Board or Councils. The information obtained will be kept confidential and will only be used for internal management purposes. There have been occasions when members of the public and/or Congress have requested information regarding the demographic composition of the Board and Councils. If the Bureau receives and responds to such a request, data provided will not identify any specific individual."

### **Paperwork Reduction Act**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 3170-0037. It expires on 07/31/2016. The time required to complete this information collection is estimated to average approximately 45 minutes per response, including the time for reviewing any instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection of information is voluntary. Comments regarding this collection of information, including the estimated response time, suggestions for improving the usefulness of the information, or suggestions for reducing the burden to respond to this collection should be submitted to Bureau at the Consumer Financial Protection Bureau (Attention: PRA Office), 1700 G Street NW, Washington, DC 20552, or by email to [CFPB\\_PRA@cfpb.gov](mailto:CFPB_PRA@cfpb.gov).

The Bureau will not disclose any personally identifiable information collected except to the extent that it is required to do so by law and as provided in the Privacy Act Statement listed below. Additionally, the Bureau will treat the information collected consistent with its confidentiality regulations at 12 C.F.R. Part 1070, et seq.

## Signature

13 I certify that the statements I have made on this form and all attached statements are true, complete, and correct to the best of my knowledge.

\* Typing your name works as your signature.

SIGNATURE

DATE

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### Please note the following before submission:

- We strongly encourage electronic submission.
- Once you have completed the application save the document as “LASTNAME\_FIRSTNAME\_DATE”. Once saved please click the blue “Submit application” button below. If you experience issues with the submit function, please email the application and your resume to [CFPB\\_BoardandCouncilapps@cfpb.gov](mailto:CFPB_BoardandCouncilapps@cfpb.gov).
- To complete the application package, you must also attach a copy of your résumé/CV. If you prefer not to submit electronically, please mail your complete application package, which includes this form as well as a copy of your résumé/CV. Attn: Advisory Board and Council Office Consumer Financial Protection Bureau  
1700 G Street, NW, Washington, DC 20552
- Applications submitted electronically must be received on or before 11:59 p.m. EST May 5, 2019.
- Mailed applications must be postmarked on or before 11:59 p.m. EST May 5, 2019.

### Attach necessary and/or required documents to this application

To attach your resume, click on the attach file button below. You can upload multiple files, but only one file can be attached per click.

To confirm that your files have attached properly follow the navigation path below:

View > Show/Hide > Navigation Panes > Attachments

### Save the pdf application before submitting

\* Submission will be sent via email