

CORPORATION OF THE TOWNSHIP OF WEST LINCOLN

**APPLICATION FORM FOR CITIZEN REPRESENTATION ON
BOARDS & COMMITTEES**

I AM INTERESTED IN BEING A MEMBER OF:

Please indicate by checking the appropriate box, if you are interested in more than one, please indicate your choices in order of preference (i.e. 1, 2, 3):

- Age Friendly Advisory Committee
- Committee of Adjustment and Property Standards Committee
- Court of Revision (Drainage Act)
- Joint Accessibility Advisory Committee (SEE ADDITIONAL INFORMATION AND ALTERNATE APPLICATION FORM FOR THIS COMMITTEE)
- Livestock Valuer
- Mayor's Youth Advisory Committee (Youth - ages 12 to 18 years old)
- West Lincoln Heritage Committee
- West Lincoln Public Library Board (Note: Must be a Canadian Citizen)

NAME: _____

ADDRESS: _____

OCCUPATION: _____

AFFILIATED SCHOOL &/OR COMMUNITY GROUP/ASSOC.: _____

TELEPHONE NO.: (Res.) _____ (Bus.) _____

(Cell) _____

NOTE: Internet Access would be beneficial – Do you have internet/email?

YES

NO

IF YES, PLEASE PROVIDE EMAIL ADDRESS: _____

The Township of West Lincoln is committed to involving the people of West Lincoln in order to increase civic engagement and community involvement through enhanced partnerships, good governance and leadership. We invite all interested West Lincoln residents to submit an application to be a prospective member of the Committee.

.../2

Explain your interest in applying to become a member:

(If more space is required to answer the following questions, please use back of page or a separate sheet of paper)

Why do you wish to be involved in the Committee and what strengths would you bring to the Committee?

List your qualifications and/or relevant skills you consider to be an asset to being a member of the Committee:

List your current and past involvement with other community groups:

YOU MAY ATTACH ADDITIONAL INFORMATION TO THIS APPLICATION AS YOU FEEL IS RELEVANT.

Personal information on this form is collected under the authority of the Municipal Act and will be used to evaluate the qualifications of citizen appointees to Township of West Lincoln Boards and/or Committees.

Please return this application form to the attention of:

Ms. Joanne Scime, Clerk

Township of West Lincoln

318 Canborough St., Box 400

Smithville, ON L0R 2A0

OR EMAIL TO: jscime@westlincoln.ca

Phone: 905-957-3346, Ext. 5136 Fax: 905-957-3219

SIGNATURE: _____

DATE: _____

Personal information on this form is collected under the authority of the Municipal Act and in accordance with the Municipal Freedom of Information and Protection of Privacy Act and will be used to evaluate the qualifications of citizen appointees to Township of West Lincoln Boards and Committees.

In accordance with the Accessibility for Ontarians with Disabilities Act, if you require this document or any additional documents in an alternative format, please contact our office at 905-957-3346. Please know that should you require any special accommodations in order to submit and application for a position on a Board or Committee with the Township of West Lincoln, we will endeavor to make such accommodations.

We thank all those applicants who apply and advise that acknowledgement will only be forwarded to successful applicants.

DEADLINE FOR SUBMISSIONS – FRIDAY NOVEMBER 9, 2018 AT 4:30 PM