

**JOINT ACCESSIBILITY ADVISORY COMMITTEE FOT THE MUNICIPALITIES OF
GRIMSBY, LINCOLN, NIAGARA-ON-THE-LAKE, PELHAM, THOROLD, WEST LINCOLN
COMMITTEE APPLICATION FORM**

PERSONAL DATA	<input type="checkbox"/> Mr.	<input type="checkbox"/> Ms.
Name:		
Address:		
Address:		
Postal Code:		
Telephone Number: (Home)		(Business)
E-mail Address:		

REQUIREMENTS (Please check all that apply)
<input type="checkbox"/> An Elector <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> 18 years of age or older
<input type="checkbox"/> I am a person with a disability <input type="checkbox"/> I am familiar with issues affecting persons with disabilities

PREVIOUS EXPERIENCE
Please list your experience: work related, community service or other volunteer activities. (If you wish to submit your resume please feel free to do so.)

What skills, abilities and specialized knowledge do you have that you feel will assist this committee?

Briefly indicate why are you interested in serving on the Joint Accessibility Advisory Committee?

What contribution do you believe you can make to this committee?

What past contributions have you made to a similar committee or organization?

What experience do you have in exchanging your views with others and in appreciating and respecting the skills, abilities and knowledge of others?

Applicants Signature:
Date:

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
OR FAX TO: 905-957-3219

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