

**CORPORATION OF THE TOWNSHIP OF WEST LINCOLN**  
**APPLICATION FORM FOR CITIZEN REPRESENTATION ON BOARDS & COMMITTEES**

**I AM INTERESTED IN BEING A MEMBER OF: West Lincoln Heritage Committee**

West Lincoln Heritage Committee

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**OCCUPATION:** \_\_\_\_\_

**AFFILIATED SCHOOL &/OR COMMUNITY GROUP/ASSOC.:** \_\_\_\_\_

**TELEPHONE NO.:** (Home) \_\_\_\_\_

(Business) \_\_\_\_\_

(Cell) \_\_\_\_\_

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

**YES**

**NO**

**IF YES, PLEASE PROVIDE EMAIL ADDRESS:** \_\_\_\_\_

**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.**

**NAME (PRINT):** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Please return this application form to the attention of:  
Justin Paylove, Director of Legislative Services/Clerk**

**Township of West Lincoln  
318 Canborough St., Box 400  
Smithville, ON L0R 2A0  
OR EMAIL TO:**

[jpaylove@westlincoln.ca](mailto:jpaylove@westlincoln.ca)

Phone: 905-957-3346, Ext. 5129 Fax: 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.