

**COMMITTEE/BOARD APPLICATION FORM
COMMUNITY POLICING**

_____, _____, _____
Surname First Middle

Date Of Birth: _____

Address: _____ Postal Code: _____

Mailing Address (if different than above):

Telephone # _____ Cell # _____

Email address: _____

Occupation: _____

Are you presently or have you ever been a member of any Local Board/Committee?

Yes or No

If yes, please describe:

Why are you interested in being a member of the above-noted Committee/Board?

Are you willing to be an active member of this committee? Yes or No

Provide two local character references & phone numbers:

1. _____
2. _____

Please attach any information that may be helpful in evaluating your application.

Signature Date

Personal information contained on this form is required to properly assess applicants for appointment to local/board committee appointments and is gathered pursuant to the authority of the Municipal Act. The gathered information constitutes a personal information data bank pursuant to the Municipal Freedom of Information and Protection of Privacy Act. If you have any questions, please feel free to contact your local Municipal Office. Must be a minimum of 18 years of age and must consent to a criminal record check.