



DRAYTON VALLEY
'Pulling Together'

TOWN OF DRAYTON VALLEY

Application for Board/Committee Membership

NAME: _____ PHONE: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

OCCUPATION: _____

BOARD/COMMITTEE MEMBERSHIP APPLIED FOR: _____

RELATED EXPERIENCE AND QUALIFICATIONS:

BRIEFLY STATE YOUR REASONS FOR APPLYING FOR MEMBERSHIP:

OTHER PERTINENT INFORMATION:

Will you be able to attend all regular meetings and attend to matters which may require allocation of personal time?

YES NO

PLEASE PROVIDE A LETTER OF REFERENCE OR THE NAMES AND CONTACT INFORMATION OF 2 REFERENCES.

SIGNATURE: _____ DATE: _____

FOIPP: The personal information requested on this form is being collected for the purpose of assessing suitability for appointment to a Board constituted or formed by the Town of Drayton Valley. It is collected under the authority of Section 32(C) of the Freedom of Information and Protection of Privacy Act and is used exclusively and expressly for the purpose mentioned above. If you have any questions on disclosure or the use of information, please contact the FOIPP Co-ordinator at (780) 514-2200.