



TOWN OF DRAYTON VALLEY

Application for Board/Committee Membership

NAME: _____ PHONE: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

E-MAIL ADDRESS: _____

OCCUPATION: _____

I AM INTERESTED IN (SELECT ONE):

- 1 Year Term 2 Year Term
 3 Year Term No Preference

Please note that eventually the length of the term is depending on the Board's or Committee's Bylaw, Terms of Reference or similar.

SOME BOARDS/COMMITTEES HAVE SPECIFIC POSITIONS FOR CERTAIN DEMOGRAPHICS, PLEASE ANSWER THE FOLLOWING:

AGE:

- Under 21 21-35 35-55 Over 55

MUNICIPALITY OF RESIDENCE:

- Town of Drayton Valley Brazeau County Other(Please State):

BOARD/COMMITTEE MEMBERSHIP APPLIED FOR: (Please Choose)

- | | |
|---|---|
| <input type="checkbox"/> Aquatic Facility Committee | <input type="checkbox"/> Brazeau Foundation |
| <input type="checkbox"/> Early Childhood Development Centre (Childcare Operational) Board | <input type="checkbox"/> Drayton Valley Municipal Library Board |
| <input type="checkbox"/> Family and Community Support Services (FCSS) Advisory Board | <input type="checkbox"/> Mayor's Advisory Committee |
| <input type="checkbox"/> Subdivision and Development Appeal Board | <input type="checkbox"/> Other: (Please state) |

I hereby give permission to have my name stand for other vacant positions on Town of Drayton Valley Boards or Committees, should I not be selected to serve on this Board or Committee.

Please note any preferred Boards or Committees: _____

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 TWO (2) LETTERS OF REFERENCE ATTACHED WITH THIS APPLICATION.

SIGNATURE: _____ **DATE:** _____

Please return the completed form marked

ATTENTION: Administration Department
In Person 5120-52 Street, Drayton Valley
Mail Box 6837, Drayton Valley, AB, T7A 1A1
E-mail admin-support@draytonvalley.ca