



APPLICATION FOR BOARD/COMMITTEE MEMBERSHIP

NAME: _____ CONTACT NO: () _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

EMAIL ADDRESS: _____

OCCUPATION: _____

I AM INTERESTED IN (SELECT ONE):

1 Year Term 2 Year Term 3 Year Term No Preference

Please note that the length of the term is dependent on the Board or Committee Bylaw, Terms of Reference or similar.

Some Boards/Committees have specific positions for distinct demographics. Please ensure that you review the Bylaw/Terms of Reference (TOR) for the Board/Committee you may be interested in applying for, this will ensure your eligibility.

I have reviewed the Bylaw/Terms of Reference and confirm that I fit the criteria: Yes No

Municipality of Residence: Town Brazeau County Other: _____

BOARD/COMMITTEE MEMBERSHIP APPLIED FOR (please choose one):

- Sustainability Committee Early Childhood Development Centre Board
- Brazeau Foundation Family and Community Support Services (FCSS) Advisory Board
- Drayton Valley Municipal Library Board Subdivision and Development Appeal Board
- Other (please specify): _____

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 times? Yes No

PLEASE ATTACH TWO (2) LETTERS OF REFERENCE TO THIS APPLICATION.

SIGNATURE: _____ DATE: _____

PLEASE SUBMIT THE COMPLETED FORM MARKED: **ATTENTION:** Administration Department
IN-PERSON: 5120 - 52 Street, Drayton Valley
MAIL: Box 6837, Drayton Valley, AB T7A 1A1
EMAIL: admin-support@draytonvalley.ca