



THE CORPORATION OF THE TOWNSHIP OF WAINFLEET APPLICATION FORM FOR CITIZEN REPRESENTATION ON BOARDS, COMMISSIONS, & COMMITTEES

NAME: _____

ADDRESS: _____

OCCUPATION: _____

TELEPHONE NO.: (Res.) _____ (Bus.) _____

I AM INTERESTED IN BEING A MEMBER OF:

Please indicate by checking the appropriate box, if you are interested in more than one, please indicate your choices in order of preference (i.e. 1, 2):

Fenceviewer

Playground Site Selection Committee

HOW DID YOU HEAR ABOUT THE VACANCY? _____

Briefly describe additional skills or experience relevant to this appointment. If more space is required, please use a separate sheet of paper.

I am presently serving on _____
(List Boards, Commission, or Other Appointment)

Please return this application form to the attention of:

Mrs. Tanya Lamb, Clerk
Township of Wainfleet
19M43 Highway #3., Box 40
Wainfleet, ON L0S 1V0

SIGNATURE: _____

DATE: _____

APPLICATION TO BE SUBMITTED BY WAINFLEET RESIDENTS ONLY

Information on this form is collected under the authority of the Municipal Act and is used to evaluate the qualifications of citizen appointees to Township of Wainfleet boards and commissions and will become part of the public record. Direct inquiries to the Clerk at the above noted address.