



**APPLICATION FORM FOR
CITIZEN APPOINTMENT TO
BOARDS AND COMMITTEES OF THE
CORPORATION OF THE MUNICIPALITY OF CLARINGTON**

Note: Please complete this application form in its entirety. Should this application form not be fully completed, the Municipality reserves the right to reject the application. In addition, the provision of any false or misleading information on this application form will be sufficient reason for the Municipality to reject the application or to terminate an appointment.

PLEASE COMPLETE THE FOLLOWING AND SUBMIT TO:

The Corporation of the Municipality of Clarington
Municipal Clerk's Department
40 Temperance Street
Bowmanville, ON L1C 3A6

Tel: 905-623-3379 ext. 2109
Fax: 905-623-6506
Email: clerksdepartment@clarington.net

NAME OF BOARD OR COMMITTEE: If more than one, select one and indicate an alternate choice (see list on reverse side).

FIRST CHOICE:

ALTERNATE CHOICE(S):

PERSONAL DATA: Mr. Mrs. Miss Ms.

Name:

Address:

City/Town:

Postal Code

Telephone: (Home)

Telephone: (Bus.)

Email:

ELIGIBILITY & AVAILABILITY:

- | | |
|---|---|
| <input type="checkbox"/> 18 Years of Age | <input type="checkbox"/> Ability to attend night meetings |
| <input type="checkbox"/> Ability to undertake special projects, as needed | <input type="checkbox"/> Ability to attend day meetings |

EXPLAIN WHY YOU WOULD LIKE TO SERVE ON EACH BOARD OR COMMITTEE OR COMMISSION IDENTIFIED ABOVE:

PREVIOUS EXPERIENCE:

Please **attach** (or provide in the space below) details regarding your qualifications including:

- your understanding of the mandate or responsibilities of the committee or appointment;
- your experience: work related, community service oriented, or other volunteer activities which illustrate the interest, skills or abilities you may contribute;
- what interests you about the committee or appointment; and
- how your experiences would enhance the work of the committee or appointment.

****NOTE: Accessibility Advisory Committee application forms are available through our Corporate website or at the Municipal Clerk's Department.

Applicant's Signature:

Date:

Personal information collected on this form shall be used to determine suitability for appointments to Boards and Committees and is gathered under the authority of the Municipal Act. Questions about this collection of information shall be directed to the Municipal Clerk, 40 Temperance St., Bowmanville, ON L1C 3A6 or 905-623-3379 ext. 413.