

CORPORATION OF THE TOWNSHIP OF ESQUIMALT

Application for Appointment to a Committee or Commission

Application for consideration for appointment to: [If you have an interest in more than one Committee, please indicate below in order of preference.]		
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PLEASE TYPE OR PRINT USING BLACK PEN		
Name:	Address:	
Postal Code:	_ Email Address:	
*** Telephone: Home:	Business:	Daytime:
Occupation:	Employer:	
History of Community Involve	ment:	
Current Community Affiliation	is (List all groups and organization	ons to which you currently belong):
List other Council Committee	s, Boards, Commissions, etc., se	erved on in the past, including dates:
Other Relevant Personal Hist	tory:	
Reason for Seeking Appointm	nent (Individual submission only	omit if submitted by organization):

^{***} A day time phone number and email address must be provided in order to contact the applicant to schedule an interview date and time.

FILL IN THIS PART ONLY IF APPLICATION IS BEING RECOMMENDED BY A PROFESSIONAL ORGANIZATION

Name of Professional Organization submitting Candidate's Name: ______ Professional Organization Represented by: Representative's Address: Representative's Phone Number: Home: _____ Work: _____ Reason why your Professional Organization is recommending candidate for appointment: Date: _____ REPRESENTATIVE'S SIGNATURE ALL APPLICANTS TO COMPLETE THIS PART _____, hereby confirm that I am willing to accept I, ______, hereby confirm that I am willing to accept an appointment to the Commission or Committee named herein, should I be appointed to such by the Council of the Township of Esquimalt. Date: _____ CANDIDATE'S SIGNATURE *** IF SPACE PROVIDED IS INSUFFICIENT, ATTACH ADDITIONAL PAGES TO FORM***

PLEASE NOTE:

The Township of Esquimalt is committed to fostering inclusivity where people feel valued, respected, and welcomed. If you require, or would find helpful, accessibility accommodations to enabled and/or support you as an applicant or appointed member please contact us at advisory.committees@esquimalt.ca or call (250) 414-7177.

The purpose of this form is to provide information which will assist Council in its consideration of applications. In order to be considered, this application together with an up-to-date resume must be submitted to Committee Coordinator via email to advisory.committees@esquimalt.ca or via mail or in person to Esquimalt Municipal Hall, 1229 Esquimalt Road, Esquimalt BC, V9A 3P1.

Personal information you provide on this form is collected to assist in administration and/or operational functions of the Township of Esquimalt in accordance with the *Freedom of Information and Protection of Privacy Act*. This information will only be used for the purposes of committee recruitment and will not be released except in accordance with the *Freedom of Information and Protection of Privacy Act*. Questions about the collection of your personal information may be referred to the Privacy Team at foi@esquimalt.ca.