



**TOWNSHIP OF PERTH EAST
APPLICATION FOR ADVISORY COMMITTEES, BOARDS
AND OTHER PUBLIC APPOINTMENTS**

NAME: (please print)

ADDRESS:

POSTAL CODE:

TELEPHONE # (DAYTIME):

TELEPHONE # (EVENING):

Minimum Requirements: (may vary by committee) Check the following that apply to you

- a Canadian Citizen
- 18 years of age or older
- A resident of the Township of Perth East or an eligible elector in the Township of Perth East
- Ability to regularly attend meetings (daytime and/or evening as scheduled)

Which Board or Committee are you applying for:

- Perth East Public Library Board

1. What is your understanding of the mandate or responsibilities of the Board, Committee or other positions you are expressing interest in?

2. What interests you most about the Board or Committee?

3. What projects or initiatives do you see the Board or Committee having?

4. What kind of volunteer or work related experiences have you had?

How would these enhance the work of the Board or Committee?

5. Describe your previous volunteer experience serving on Boards, Committees or other positions in the Community?

**6. Have you previously served on Boards, Committees or other positions?
If yes, indicate the Boards, Committees or other positions and years of service.**

NAME OF BOARD OR COMMITTEE: YEARS OF SERVICE:

7. Why do you wish to serve on this Board or Committee

Personal information collected on this application is gathered in accordance with the Municipal Act, for use when making appointments to Boards and Advisory Committees. The information on this application will be provided to Council for selection of members to serve on Boards and Committees. The information contained on this form may be subject to disclosure under the Municipal Freedom of Information and Protection of Privacy Act if circumstances warrant. Inquiries about the Act may be directed to the Clerk at (519) 5952800, Ext. 223.

DATE:

SIGNATURE OF APPLICANT:

Mail, Email or Deliver the Application to:

**Ashley Carter, Municipal Clerk
Corporation of the Township of Perth East
25 Mill Street East, P. O. Box 455
Milverton, ON NOK 1MO
Fax: 519-595-2801
Email: acarter@pertheast.ca**