



Application for Appointment to Advisory Board/Committee

Minimum Requirements		Return Completed Application to			
18 Years of Age		Clerk			
North Perth Resident		Municipality of North Perth			
Ability to attend Monthly, By-monthly or Quarterly (evening) meetings as required		330 Wallace Avenue North			
		Listowel ON N4W 1L3			
		519-292-2062			
Pursuant to the <i>Municipal Freedom of Information and Protection of Privacy Act</i> , the personal information contained in this form will be used solely to assess your qualifications for appointment to one of the Municipality's Statutory Boards or Committees.					
Details					
Last Name		First Name		Middle Name	
Address			City	Province	Postal Code
Telephone No. (Day)		Telephone No. (Evening)		Email Address	
Indicate the Advisory Committee or Board you are most interested in applying for					
1 st Choice			2 nd Choice		
Reasons for Seeking Appointment					
Additional information which may be helpful in consideration of your application i.e. experience, hobbies or interests (attach additional information if needed)					
Signature			Day	Month	Year
			Attachment		
			Yes		No
Office Use Only					
Date	Application No.	Committee			Clerk Review