



2019 – 2022

Town of Penetanguishene

Advisory Committee/Board Application

IMPORTANT – The Town Advisory Committees are currently under review through the Service Delivery Review and there may be changes to the structure and names of the Committees

Thank you for your interest in volunteering to be appointed to an Advisory Committee of Council with the Town of Penetanguishene. Completed application forms can be returned to Townhall, 10 Robert Street West, Penetanguishene, by fax to 705-549-3743 or by email to scooper@penetanguishene.ca

PART 1 (Print clearly in space provided)			
Surname	Given Names		
Mailing Address			
City/Town	Postal Code		
Home Phone	Cell Phone		
Physical Address (if different from above)	Email		
PART 2 (Check yes or no)		YES	NO
Are you at least eighteen (18) years of age? (committees other than Youth Council)			
Are you a Canadian citizen?			
Are you an employee or contractor of the Town of Penetanguishene?			
Have you been convicted of an offence under the Canadian Criminal Code: Will not, as a result of direct or indirect pecuniary interests under the Municipal Conflict of Interest Act, R.S.O. 1990, C.50 as amended, be consistently prevented from participated in the business of the Committee?			
Do you have a current or pending litigation/lawsuit with or against the Town of Penetanguishene?			
Do you have a current or previous experience working on a volunteer committee?			
Are you a resident of the Town of Penetanguishene?			
Are you affiliated with a volunteer committee or group that has a mandate similar to the committee for which you are applying (e.g. regional, provincial committee)? Please indicate the name of the Committee: _____			
Please indicate any experience and/or qualifications that you feel would be an asset to the Committee/Board for which you are applying: (or attach a resume)			



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Why do you want to volunteer for the Committee/Board for which you are applying?

PART 3 (Note your preference in numerical order beside all that apply)

**If you selected Accessibility or Downtown Improvement Committee, please refer to additional questions below.*

<input type="checkbox"/> Accessibility *	<input type="checkbox"/> Downtown Improvement*	<input type="checkbox"/> Heritage	<input type="checkbox"/> Library Board
<input type="checkbox"/> Museum Advisory Committee	<input type="checkbox"/> Police Services Board	<input type="checkbox"/> Seniors Council	<input type="checkbox"/> Trails
<input type="checkbox"/> Transit Committee	<input type="checkbox"/> Committee of Adjustment	<input type="checkbox"/> Youth Council	

Accessibility Committee

YES NO

Are you a disabled person within the meaning of the ODA or AODA?

Are you employed by or volunteer with an association that provides services and/or support to the disabled community?

Downtown Improvement Committee (Indicate what sector best describes you)

YES NO

Main Street and/or Small Business Owner

Owner and/or Small Business Owner

Owner and/or Operator/Employee of a business in the industrial park

Owner and/or Operator/Employee of a tourism based business or marina

Owner and/or Operator/Employee of a finance, real estate or development business

Employed by or a volunteer with an association that provides services and/or services to the Francophone Community

I declare that the information provided by me in this application is, to the best of my knowledge, an accurate statement of the facts.

Signature

Date

FOR OFFICE USE ONLY

Reviewed by (staff):

Reviewed by (Mayor):

Appointed by Council (date):

Appointed to (committee):

Personal information contained on this form/document/application is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy* and will be used for the purpose for which it was collected. Questions about this collection should be directed to the Clerk of the Town of Penetanguishene.