

# ADVISORY BODY APPLICATION

Advisory body you wish to be considered for: \_\_\_\_\_

(\*note: A separate form must be completed for each vacancy you wish to be considered for)

CANDIDATE INFORMATION			
Name of Applicant:			
Civic (Street) Address:			
Mailing Address:	City:	Province:	Postal Code:
Home Phone:	Business:	Fax:	
Email Address:			
Reason for Seeking Appointment:			
History of Community Involvement:			
Related skills and experience:			
<p><i>I signify that I am willing to accept an appointment to the Board, Commission or Committee named herein, should I be appointed to such by the Council for the Town of Ladysmith.</i></p>			
Signature of Applicant: _____		Date: _____	

*The personal information on this form is collected under the general authority of the Community Charter and Freedom of Information & Protection of Privacy Act (FOIPPA) and is protected in accordance with FOIPPA. Personal information will only be used by authorized staff to fulfill the purpose for which it was originally collected or for a use consistent with that purpose. If you have any questions about the use and collection of this information, contact the Corporate Officer at 250.245.6417 or [foi@ladysmith.ca](mailto:foi@ladysmith.ca).*

