

Return completed forms to:
Clerks Department
411 Greenfield Street
Petrolia, ON NON 1R0
mpearson@petrolia.ca

Town of Petrolia Committee Appointment Application Form

Pre	efix	Mr	Mrs	Miss	Ms			
Fir	st Na	me:			Last Name:	Last Name:		
Ad	dress):						
Email Address:					Home P	hone #	Postal Code	
Cell Phone #					Daytime contact	#		
DI-	1	·	shi ah Camanith	2(2)				
			hich Committe	e(s) you are	applying for:			
Co	mmur	nity Service	es Advisory					
Pet	trolia	Heritage A	dvisory					
Pet	trolia	in Bloom A	dvisory					
Pet	trolia	Accessibilit	y Advisory (AOD	OA)				
Pet	trolia	150 th Anniv	versary Advisory	,				
			& Wellness Advi					
			stment & Proper					
		onnaire		tion:				
2)	Plea	se describ	e your relevan	t educational	background:			
3)	Plea	se describ	e your relevan	t occupationa	l background:			
4)					certificates, member re relevant to the c			

Personal information on this form is collected under the authority of section 28(2) of the *Municipal Freedom of Information and Protection of Privacy Act Ch. M. 56 R.S.O. 1990* and will be used for the purposes of making appointments to Committees. Any questions about the collection of this information may be addressed to the Clerk's Department.

The Town of Petrolia is committed to inclusive, barrier-free processes and work environments. We will accommodate the needs of applicants under the Ontario Human Rights Code and the Accessibility for Ontarians with Disabilities Act (AODA).

5) Please describe what strengths you feel you will bring as	s part of a commit	tee:
NOTE: Please add separate pages if more space is required	d in any area.	
6) Have you previously served on a Town of Petrolia Commify yes, which one?		No No
7) Have you previously served on any other Community Organizations or Committees? If yes, please provide name(s)	Yes	No No
B) Are you available to attend meetings: Yes No Daytime Yes No Evening		
If you are applying for the Accessibility Advisory Commi Are you a person with disability?	No	
If you are applying for the Committee of Adjustment & F	Property Standar	rds:
	ease indicate wheth	ner you have attach

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Please be aware that the application process is not complete until a resolution is passed at an official meeting of Council. You will be notified by letter about the outcome of your application.

Eligibility:

Please check all that apply to you:

Requirements	Yes	No
Between 14-18 Years of Age (youth member)		
18 Years of Age or Older		
Eligible Elector in the Town of Petrolia		
Canadian Citizen		
Reside in the Town of Petrolia		
If No:		

Certification:

The provision of any false or misleading information on this application will be sufficient reason for the Town to reject the application or to terminate an appointment.

Rele	ase of Contact Information (please choose one of the following) I hereby consent to the release of my contact information including name, phone number and email to the public as committee contact information.
	I DO NOT consent to the release of my contact information to the public as committee contact information. I do understand that my contact information WILL BE available to the Town of Petrolia and its employees and other members of the Committee. I also understand that my "Name" will appear on the Town of Petrolia website as a committee member.
I here	eby certify that the information contained in this application form is accurate.
Signat	ture Date

Please return application to Mandi Pearson, Clerk/Operations Clerk 411 Greenfield St, Petrolia, ON NON 1R0 or mpearson@petrolia.ca by 4:30 p.m., Wednesday, October 31, 2018

Call for applications are conducted in October 2018 & October 2020, although applications may be considered at other times of year.

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