



Application for Volunteer Committee Members

| | | |
|--|--|---------|
| STATE COMMITTEE VOLUNTEERING FOR: | | |
| <p>Please complete the following application and submit to: Council & Committee Services Coordinator Clerk's Division, Corporate Services Department 1 Halton Hill Drive Halton Hills, ON L7G 5G2</p> | | |
| | Telephone: (905) 873-2601 x 2333 Facsimile: (905) 873-1431 reeneb@haltonhills.ca | |
| REQUIREMENTS: A RESIDENT OF HALTON HILLS | | |
| PERSONAL DATA: | | |
| Name | | |
| Address: | | |
| Postal Code: | | |
| Telephone: (Home) | (Bus.) | (email) |
| EXPLAIN WHY YOU WOULD LIKE TO SERVE THIS COMMITTEE: | | |
| | | |
| PREVIOUS EXPERIENCES: | | |
| State, in detail, your experience: work related, community service oriented, or other volunteer activities, which illustrate the interest, skills or abilities you may contribute. Please attach a current resume, if available. | | |
| | | |
| Please indicate the highest academic level have attained: | | |
| | | |
| REFERENCES: | | |
| By applying your signature to this application, you authorize the Municipality to contact the following persons or organizations and authorize them to disclose any required information to the Municipality. | | |
| Name/Please State Association With Person | Telephone | |
| | | |
| | | |
| | | |
| Applicant's Signature | Date | |
| Personal information on this form is collected under the authority of the <i>Municipal Act</i> , (and the legislation expressly associated with individual committees) and will be used only for the purposes of recruitment of individuals to Municipality Boards, Committees and Commissions. Information on this form will be disclosed to the Council for candidate selection purposes only. Questions about the collection of information, should be directed to the Clerk at the address indicated at the top of this application. | | |