



Application for Appointment to Town of Fort Erie Boards and Committees

Please Note: You must be an Eligible Elector in the Town of Fort Erie in order to be a Board/Committee member. Eligible Elector means: You are a resident in the Town of Fort Erie or the owner or tenant of land, or the spouse of such owner or tenant; a Canadian citizen; and at least 18 years old.*

Application for Appointment (Name of Business Improvement Area Board or Committee) *REQUIRED*	
Contact Information	
Name:	
Cell Number:	Home Number:
Address:	
P.O. Box # or R.R. #:	Postal Code:
Email Address:	
Qualifications	
<p>Have you previously been a member of this or any other Town of Fort Erie Board/Committee?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please indicate which board/committee and the length of service:</p> 	
<p>Are you applying to serve on another Town of Fort Erie Board/Committee?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, which Board/Committee:</p> 	
<p>How did you learn about this position?</p> <p><input type="checkbox"/> Newspaper (please specify) _____</p> <p><input type="checkbox"/> Town's website <input type="checkbox"/> Word of Mouth</p> <p><input type="checkbox"/> Community Organization <input type="checkbox"/> Other (please specify) _____</p>	
<p>If applying to a Business Improvement Area Board: (Please review relevant by-laws and Board webpage)</p> <p>Do you own or rent property within the Business Improvement Area? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please indicate which property or business (if more than one, please list all):</p> 	

Please state why you are interested in serving on this Board/Committee:

Based on the mandate of the Board/Committee you are applying for, please list your relevant education, work or volunteer experience:

What skills, abilities and specialized knowledge do you have that will assist this Board/Committee:

Please add any additional information or comments (a resume may be submitted with this form but will not be accepted instead of this application):

Acknowledgement and Declaration

I have read and understand the Board/Committee mandate and confirm that I am able to commit the time required to carry out those duties. I also confirm that I am a resident of the Town of Fort Erie and an Eligible Elector.

Signature of Applicant

Date

Council will review the applications and engage in a public selection process at an upcoming Regular Council Meeting. All information will remain confidential and subject to the *Municipal Freedom of Information and Protection of Privacy Act*, except the successful Applicant's name.

Please submit your completed application by mail, email, fax or drop off at Town Hall Reception to:

Carol Schofield, Manager, Legislative Services/Clerk

Town of Fort Erie

1 Municipal Centre Drive

Fort Erie, ON L2A 2S6

Email: cschofield@forterie.ca Fax: 905-871-4022