



Box 30, Beaverlodge, AB T0H 0C0

Phone: 780.354.2201

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COUNCIL COMMITTEE APPLICATION FORM
 PLEASE RETURN COMPLETED FORM AND ATTACHMENTS
 TO: #400-10 STREET BEAVERLODGE, AB TOH 0C0
TOWN@BEAVERLODGE.CA

PERSONAL INFORMATION			
First Name:		Last Name:	
Address:			
Town/Province:		Postal Code:	
Home Phone:		Cell Phone:	
Email Address:			
Length of Residence in Beaverlodge:			
Academic/Professional Qualifications:	<i>You are encouraged to enclose a copy of your resume or a synopsis outlining any additional information you deem important.</i>		
COUNCIL COMMITTEE INFORMATION			
What Council Committee are you interested in serving on?			
What skills do you feel you could contribute to this Committee?			
What goals do you hope to achieve by being a member on this Committee?			
What type of volunteer activities have you been involved with over the past 5 years?			
Are you currently serving on a Beaverlodge Council Committee?			
YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, which Committee are you serving on and when does your term expire?	
Have you served on a Beaverlodge Council Committee or any other municipal board/committee in the past?			
YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, what committee did you serve on and what was the last year served?	
If necessary, please indicate the name of the municipality where you served.			
SIGNATURE			
Applicant's Signature:		Date:	
<small>Personal information on this form is being collected for the purpose of determining eligibility of an applicant to serve as a member on a Town of Beaverlodge Council Committee. This information is collected under the authority of Section 33 of the Freedom of Information and Protection of Privacy Act. The name of successful applicants will be provided to the public. Questions regarding the collection of this information can be directed to the Town of Beaverlodge Legislative Services at 780-354-2201, PO Box 30 Beaverlodge, AB T0H 0C0.</small>			