

TOWNSHIP OF EMO

APPLICATION TO SERVE ON AN ADVISORY COMMITTEE OR A BOARD

Advisory Committee/Board applied for: _____

Name in Full: _____

Address of Residence: _____

Mailing Address if not the same as Residence: _____

Business Phone # _____ Residence Phone: # _____

Are you a Canadian citizen? _____

Are you now or will you be by December 1 of this year be 18 years of age or older? _____

If you have not resided in the Township of Emo for the past full year, on what date did you become a resident? _____

Additional information (personal interests, hobbies, community involvement): _____

Why do you want to be a member of this advisory committee or board? _____

Date: _____ Signature: _____

PERSONAL INFORMATION ON THIS FORM IS COLLECTED UNDER THE AUTHORITY OF THE *MUNICIPAL ACT, 2001*, S.O. 2001, c. 25, AS AMENDED, AND WILL BE USED TO DETERMINE ELIGIBILITY FOR APPOINTMENT TO THE ADVISORY COMMITTEE/BOARD APPLIED FOR. QUESTIONS ABOUT THIS COLLECTION OF PERSONAL INFORMATION SHOULD BE DIRECTED TO THE TOWNSHIP CLERK, 39 ROY STREET, EMO, ONTARIO, P0W 1E0.