



Township of Emo Board and Committee Application Form

For Appointment to Municipal Boards and Committees

Office of the Clerk
39 Roy Street; P.O. Box 520
Emo, ON P0W 1E0
P: (807) 482-2378
township@emo.ca

Name of Committee/Board of Interest:

Prefix ☐ Mr ☐ Mrs ☐ Miss ☐ Ms

First Name: _____ Last Name: _____

Address: _____
Postal Code

Email Address: _____ Home Phone: _____

Cell Phone # _____ Daytime contact # _____

Questionnaire:

The following information will assist Council in reviewing all applicants to determine the best fit for the boards and committees of the Township of Emo. This information will be used only for the purposes of review and selection and will not be shared by any other party.

1) Occupation or former occupation: _____

2) Please describe your relevant educational background: _____

3) Please describe your relevant occupational background: _____

4) Please list any special degrees, licenses, certificates, memberships, special achievements, training or other volunteer activities that are relevant to the board or committee you are applying for:

5) Please describe why you feel this board/committee is an important committee for your community:

6) Please describe what strengths you feel you will bring to this board/committee:

NOTE: Please add separate pages if more space is required in any area. It is helpful if a resume is also attached, but is optional. Please indicate whether you have attached a resume.

☐ Yes ☐ No

7) Have you previously served on a Township of Emo Committee or Board? ☐ Yes ☐ No

If yes, which one? _____

8) Are you available to attend meetings in the evenings as required? ☐ Yes ☐ No

Comments: _____

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

Release of Contact Information (please choose one of the following)

☐ I hereby consent to the release of my contact information including address, home phone numbers and email to the public as committee contact information.

☐ I DO NOT consent to the release of my contact information including address, home phone numbers and email to the public as committee contact information. I do understand that my contact information WILL BE available to the Township of Emo and its employees and other members of the Committee or Board. I also understand that my "Name" may appear on the Township of Emo website as a committee or board member.

Eligibility:

Please check all that apply to you:

Requirements	Yes	No
18 Years of Age or Older	☐	☐
Eligible to Vote in the Community that you are Applying to Represent	☐	☐
Are a Canadian Citizen	☐	☐

What municipality are you applying to be a Community Representative for?

Emo – LaVallee Community Centre: LaVallee ☐ (Eligible to Vote in the Township of La Vallee)

Emo Public Library Board: Chapple ☐ (Eligible to Vote in the Township of Chapple)

LaVallee ☐ (Eligible to Vote in the Township of LaVallee)

Certification:

The provision of any false or misleading information on this application will be sufficient reason for the Township of Emo to reject the application or to terminate an appointment. I hereby certify that the information contained in this application form is accurate.

Signature

Date

Personal information collected on this form is pursuant to the Municipal Act, 2001 as amended and will be used for the administration of the municipality. Questions about this collection should be directed to the FOI Coordinator, Township of Emo, P.O. Box 520, Emo, ON P0W 1E0 (807) 482-2378.