



THE CORPORATION OF THE CITY OF VERNON

Application for Appointment to Committee/Commission/ Task Force

Applications will be considered by Council and applicants will be informed by email and/or mail ..

Individual Applicants MUST reside within Vernon City Limits, unless otherwise stated in Committee/Commission/Task Force Terms of Reference.

PERSONAL INFORMATION

Name:

Home Address:

City:

Postal Code:

Home Phone:

Cell Phone:

Email:

If appointed, do you agree to the following contact information being shared with the other committee/commission/task force members?

E-mail: Yes No

AREA OF INTEREST

The Committee's Terms of Reference (TOR) are available at www.vernon.ca/government-services/mayor-council/council-committees. Please read the TOR for any Committee/Commission/Task Force you are considering, prior to applying.

Please indicate, the committee(s), commission or Task Force you are applying for:

___ Advisory Planning

___ Affordable Housing Advisory

___ Board of Variance

___ Economic Development Advisory

___ Tourism Commission

___ Transportation Advisory

Name of Task Force _____

Are you a business operator in the City of Vernon Yes No

Are you applying as a representative of a business, community association or other organization?

Yes No

If yes, identify the business/association/organization: _____

What are your reasons for seeking appointment?

Outline how your skills and experiences support your application for appointment?

Note: The information you provide on this form is collected by the City of Vernon under Section 26 (c) of the Freedom of Information and Protection of Privacy Act (FOIPPA) and will be used for purposes of Advisory Committee recruitment, appointment and contact only. Questions about the collection and use of this information should be directed to the Head of FOIPP in the Legislative Services Department at 250-550-3526, at foirequest@vernon.ca or at 3400 30 Street, Vernon B.C. V1T 5E6

Describe your history of community involvement (both past and present):

TO BE SIGNED BY THE APPLICANT

I confirm that the above information is true and correct.

Signature of Applicant

Date

Submit Your Application To:

Corporate Officer
City of Vernon | 3400 30 Street | Vernon, B.C. V1T 5E6
Telephone: 250-545-1361 | Email: admin@vernon.ca