



City of Prince Albert

APPLICATION FOR APPOINTMENT BOARDS & COMMITTEES

(Please print or type)

Name: (Mr./Ms.) _____

Address: _____
(include postal code)

Telephone: (Home) _____ (Cell/Work) _____

E-Mail Address: _____

Occupation: _____

Name of employer, or the partnership or firm to which you belong:

List any corporation in which you have a controlling interest, or you are a director/senior officer:

List current involvement in Community, and other relevant activities including participation on Boards, Committees, and Organizations:

Select the areas of interests (check as many as apply):

<input type="checkbox"/> Housing	<input type="checkbox"/> Transit/Transportation
<input type="checkbox"/> Heritage/History	<input type="checkbox"/> Streets/Bridges/Structures
<input type="checkbox"/> Arts/Culture	<input type="checkbox"/> Cultural Diversity/Seniors/Youth
<input type="checkbox"/> Recreation/Fitness	<input type="checkbox"/> Environment
<input type="checkbox"/> Planning/Urban Design/Development	<input type="checkbox"/> Grants/Funding
<input type="checkbox"/> Tourism/Event Planning	<input type="checkbox"/> Protective/Emergency Services
<input type="checkbox"/> Property Standards	<input type="checkbox"/> Library
<input type="checkbox"/> Downtown District/Commercial	<input type="checkbox"/> Legal/Legislative
<input type="checkbox"/> Aviation	<input type="checkbox"/> Other _____

State your skills, experience and other qualifications relating to the chosen areas of interest: (Please restrict any attachments to two pages.)

Please list **two** references:

Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Phone: _____	Phone: _____

In accordance with Section 24 of *The Local Authority Freedom of Information and Protection of Privacy Act*, the personal information collected on this form will be used for purposes relating to the selection process for appointment to a City of Prince Albert Board or Committee and for administration of the appropriate Board or Committee.

I certify that all information submitted is true and complete.

Date

Signature of Applicant

Please indicate how you heard of the opportunity of participating on a City Council Board or Committee:

- The City of Prince Albert Website
- Newspaper
- Radio
- Facebook
- Other (please specify) _____

Send completed applications to:

City Clerk
Room 208, City Hall
1084 Central Avenue
Prince Albert SK S6V 7P3
Fax #: 306-953-4313
Email: cityclerk@citypa.com