



City of Kenora Board and Committee Application Form

For Appointment to Municipal Boards and Committees

Office of the City Clerk
1 Main Street South
Kenora, ON P9N 3X2
P: (807)467-2295 F: (807) 467-2009
hkasprick@kenora.ca

Name of Committee/Board of Interest:

Prefix Mr Mrs Miss Ms

First Name: _____ Last Name: _____

Address: _____

Email Address: _____ Home Phone # _____ Postal Code

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 City. This information is 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 our City:

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 City of Kenora Committee? Yes No
If yes, which one? _____

8) Are you available to attend meetings in both daytime and evenings as required?
 Yes No Comments: _____

If you are applying for the Accessibility Advisory Committee:
Are you a person with disability? Yes No
If yes, please briefly describe your disability: _____

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. Council meeting dates and agendas are available online at www.kenora.ca.

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

- I hereby consent to the release of my contact information including address, home and/or business 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 and/or business phone numbers and email to the public as committee contact information. I do understand that my contact information WILL BE available to the City of Kenora and its employees and other members of the Committee. I also understand that my "Name" my appear on the City of Kenora website as a committee member.

Eligibility:

Please check all that apply to you:

Requirements	Yes	No
18 Years of Age or Older		
Eligible Elector in the City of Kenora		
Canadian Citizen		
Reside in the City of Kenora		

Certification:

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

Signature

Date