



The Corporation of the Municipality of Meaford  
Application for Advisory Committees & Other Boards

<b>Name</b> (Please Print):	
<b>Address:</b>	<b>Phone:</b>
	<b>Email:</b>

<p><b>Do you live, work or own a property or business in the Municipality of Meaford?</b></p> <p>Y ____ N ____</p>
<p><i>Please indicate the groups you are interested in, noting preference (e.g. 1st choice)</i></p> <p><b>Committee of Adjustment</b> _____</p> <p><b>Meaford Public Library Board</b> _____</p>
<p><b>Please describe your reasons for wishing to serve on an advisory committee or board:</b></p>
<p><b>What qualifications or experience would you bring:</b> <i>(Please include your resume and feel free to attach additional information)</i></p>



The Corporation of the Municipality of Meaford  
Application for Advisory Committees & Other Boards

**If you have previously served on a Municipality of Meaford board, committee or group, please list them below.**

Board/Committee/Group	Years of Service

Please list any additional relevant information:

The information on this application is gathered in accordance with the Municipal Act, S.O. 2001 c. 25. This application is to be considered confidential and used only by the Clerk for administrative purposes and will be distributed to Municipal Council for selection of members. All information of a personal or private nature is protected by the Municipal Freedom of Information and Protection of Individual Privacy Act, Chapter F.31, R.S.O., 1990. Any or all of the information contained on this form may be subject to disclosure under the Act if circumstances warrant.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant



**The Corporation of the Municipality of Meaford  
Application for Advisory Committees & Other Boards**

**Please attach a copy of your resume to this application form.** You may also attach any additional information or supplemental documents you deem relevant. *Please note all appointees must sign the Municipality's Council & Local Board or Advisory Committee Code of Conduct to be appointed.*

**Submit Application To:** Municipality of Meaford  
21 Trowbridge Street West  
Meaford ON, N4L 1A1  
Email: [apenner@meaford.ca](mailto:apenner@meaford.ca)  
Fax: (519) 538-1556

**Applications must be received by 4:00 p.m. on Tuesday, December 20, 2022.**

*Late or incomplete applications will not be considered.*