



APPLICATION STANDARDS

- All sections of the form must be completed except for the section marked 'Self-Declaration' which is optional. Please enter 'N/A' or 'Prefer Not to Say' in any sections that are not applicable.
- Applicants must submit one letter of reference and a short (1-2 page) resume with their application.
- Applicants must live within the boundaries of the District of Vanderhoof as per the *District of Vanderhoof Zoning Bylaw, No. 994, 2006, Schedule A*.
- Application packages can be submitted in person or by mail to Municipal Hall at 160 Connaught Street, Vanderhoof, BC, V0J 3A0, or by e-mail to dco@district.vanderhoof.ca.

Successful candidates will be contacted once Council has made their decision.

APPLICATION FORM

PERSONAL INFORMATION

TITLE & NAME	YEARS RESIDING IN VANDERHOOF
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STREET & MAILING ADDRESS

PHONE	EMAIL
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EMPLOYER/BUSINESS

TIME SPENT VOLUNTEERING	TIME AVAILABLE FOR ADDITIONAL VOLUNTEERING
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APPLICABLE INFORMATION

1. Please indicate which committee(s) you are applying for.

2. List your involvement with other boards, organizations, and school and/or neighbourhood groups, whether within District boundaries or another community. Include any offices held.



3. Describe your volunteer experiences and community involvement.

4. Describe your background/experience/expertise that is relevant to this committee.

5. Please tell us why you are interested in serving on this committee and what you hope to contribute by your participation.

SELF-DECLARATION (OPTIONAL)

The District of Vanderhoof strives towards having the membership of its committees reflect values of equity, diversity, and inclusion. Your answers to these questions will be used for the purposes of measuring the composition of our committees and will guide decisions for future initiatives in working towards equitable representation. The information you provide is confidential and will only be viewed by the selection committee and appropriate administration.

1. Do you identify as a person of Indigenous ancestry?

Yes No Prefer Not to Say

2. Do you identify as a member of a visible minority group?

Yes No Prefer Not to Say

3. Do you identify as a person with a disability?

Yes No Prefer Not to Say

4. Please identify your gender.

Male Female Non-binary Other Prefer Not to Say

5. Please identify your age range.

18 – 29 years 30 – 45 years 45 – 60 years 61 + years Prefer Not to Say