



**Citizen Representation Application Form  
for Appointment to an Advisory Committee, Board or Commission**

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home phone : \_\_\_\_\_ Home e-mail : \_\_\_\_\_

Work phone : \_\_\_\_\_ Work e-mail : \_\_\_\_\_

Cellular phone: \_\_\_\_\_ Other : \_\_\_\_\_

How do you prefer to be contacted? \_\_\_\_\_

Area of interest: \_\_\_\_\_

(Please indicate the name of the committee if you are applying for a specific committee)

Briefly describe why you are seeking appointment:

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Briefly describe your background / experience/ expertise relevant to this appointment:

(Please include relevant resume information or attach additional information if needed)

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Briefly describe your volunteer experience in the past five years:

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## APPLICATION FOR APPOINTMENT

If you are appointed, do you agree to the following information being included in the list of committees which is available to the public and posted on the City of Dieppe's website.

	Yes	No	Comments
Address	<input type="checkbox"/>	<input type="checkbox"/>	_____
Telephone number	<input type="checkbox"/>	<input type="checkbox"/>	_____

## AVAILABILITY FOR MEETINGS

	Yes	No	Comments
Would you be available to attend meetings in the evening?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Would you be available to attend meetings during the day?	<input type="checkbox"/>	<input type="checkbox"/>	_____

## WHAT HAPPENS NEXT?

Your application will be considered by Council and the Mayor's Office will advise you as to whether or not you have been appointed. Applications are kept on file for a period of approximately one year from the day of the submission.

## QUESTIONS?

If you have any questions, require more information, or to view the complete list of committees, please visit our website at [www.dieppe.ca](http://www.dieppe.ca).

## PLEASE SUBMIT YOUR APPLICATION USING ONE OF THE FOLLOWING METHODS:

**Mail:** Mayor's Office, 333 Acadie Avenue, Dieppe, E1A 1G9

**E-mail:** [mayor@dieppe.ca](mailto:mayor@dieppe.ca)

**NAME (please print):**

**SIGNATURE:**

**DATE:**

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*This information is collected for administrative and/or operational functions of the City of Dieppe as authorized by the Local Government Act. This information has been collected, and will be used and maintained, in accordance with the Freedom of Information and Protection of Privacy Act. Should you have any questions about the above please contact the clerk's office at 877.7908.*