



## **TOWN OF HIGH RIVER**

### **APPLICATION FORM FOR APPOINTMENT TO TOWN BOARD/COMMISSION/COMMITTEE ELIGIBILITY REQUIREMENTS**

To be eligible for appointment as a member of a Town of High River Board/Commission/Committee, applicants shall be:

- 1) The full age of 18 years,
- 2) A Canadian citizen or landed immigrant,
- 3) A resident of the Town of High River for six (6) consecutive months immediately preceding the date of submitting an application unless specific provisions to the contrary exist in a particular bylaw(s), and
- 4) Any other specific requirements that may be contained within each governing bylaw.

## TOWN OF HIGH RIVER

### APPLICATION FORM

for

### APPOINTMENT TO BOARD/COMMISSION/COMMITTEE

(Resumes and references are optional although the background information will be helpful for the selection committee)

<b>NAME</b>		<b>DATE</b>	
<b>ADDRESS</b>		<b>POSTAL CODE</b>	
<b>PHONE (RES)</b>		<b>PHONE (BUS)</b>	
<b>E-MAIL ADDRESS</b>		<b>FAX</b>	
<b>Number of Years as a Resident of the Town of High River</b>			
<b>I AM INTERESTED IN SERVING ON THE <i>(list preferences in order)</i></b>		<b>And</b> <input type="checkbox"/>	
		<b>Or</b> <input type="checkbox"/>	
<b>And</b> <input type="checkbox"/>		<b>And</b> <input type="checkbox"/>	
<b>Or</b> <input type="checkbox"/>		<b>Or</b> <input type="checkbox"/>	

**COUNCIL HAS ESTABLISHED THE FOLLOWING BOARDS AND COMMITTEES:**

- ASSESSMENT REVIEW BOARD (ARB)
- COMMUNITY VITALITY ADVISORY COMMITTEE (CVAC)
- FAMILY AND COMMUNITY SUPPORT SERVICES (FCSS)
- HERITAGE ADVISORY BOARD (HAB)
- HIGH RIVER ARTS & CULTURE BOARD (One M.D. of Foothills Member)
- HIGH RIVER & DISTRICT RECREATION BOARD (One M.D. of Foothills Member)
- HIGH RIVER LIBRARY BOARD (One M.D. of Foothills Member)
- HIGH RIVER DRP ADVOCACY COMMITTEE
- HIGH RIVER POLICING COMMITTEE (One Youth Member)
- MAYOR'S ECONOMIC DEVELOPMENT TASK FORCE
- PLANNING RENEWAL ADVISORY COMMITTEE
- SUBDIVISION AND DEVELOPMENT APPEAL BOARD (SDAB)

**ARE THERE ANY PERSONAL GOALS AND OBJECTIVES THAT YOU WOULD LIKE TO ACHIEVE AS A MEMBER ON THE BOARD(S)/COMMISSION(S)/COMMITTEE(S) YOU ARE APPLYING FOR?**

**PREVIOUS/CURRENT COMMUNITY INVOLVEMENT**

**DO YOU HAVE ANY RELATED EXPERIENCE IN THIS AREA OF INTEREST?**

**ANY ADDITIONAL INFORMATION THAT MAY BE RELEVANT?**

**REFERENCES RELATED TO COMMITTEE/BOARD APPLYING FOR:**

<b>Name:</b>	<b>Phone:</b>	<b>Name:</b>	<b>Phone:</b>
<b>Address:</b>		<b>Address</b>	
<b>SIGNATURE OF APPLICANT</b>			

***PLEASE RETURN THIS FORM TO:***

<b>TOWN OF HIGH RIVER</b> <b>309B Macleod Trail S.W.</b> <b>HIGH RIVER, ALBERTA</b> <b>T1V 1Z5</b>	<b>ATTENTION: Legislative Services</b> <b>e-mail: thrlegislativeservices@highriver.ca</b> <b>Phone: 403-603-3652; Fax: 403-652-2396</b>
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