

Address: #201 - 660 Primrose Street. PO BOX 130, Qualicum Beach, BC V9K 1S7

Phone: 250.752.6921

Email: gbtown@qualicumbeach.com

VOLUNTEER APPLICATION - ADVISORY BOARD, COMMITTEE OR COMMISSION

DATE SUBMITTED:

Thank you for your interest in serving your community through participation in a Town of Qualicum Beach advisory board, committee or commission. Information on this form is requested to assist the Town in selecting an applicant for membership. When an opening is advertised, please submit a separate form for each advisory board, committee or commission on which you are interested in volunteering. Please note committee members serve without compensation.

APPLICANT INFORMATION	
Name	
Mailing Address	
Phone Number	Email
COMMITTEE INFORMATION	
Which Town of Qualicum Beach advisory board, committee or conceptease submit a separate Volunteer Application form for each one.	ommission are you interested in joining?
Please describe your interest in this topic. Outline how your know ideal candidate. Please attach a separate page if you require more space to reach the separate page if you require more spac	•
Please describe your approach to collaborative decision-making	and consensus-building.
Are you applying as a representative of a community association or other organization?	
☐ YES - If yes, please indicate which one(s):☐ NO	
Are you currently, or have you been in the past, a member of an	y Town of Qualicum Beach advisory board, committee or
commission?	
☐ YES - If yes, please indicate which one(s) and length of serv☐ NO	ice:
Are you currently, or have you been in the past, a member of an	v advisory board, committee or commission for another local
government?	,
\square YES - If yes, please indicate where, which one(s) and length	of service:
□ NO	
Are you available to attend daytime meetings, if appointed?	
☐ YES - If yes, please indicate any limitations:	
□ NO	



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Are yo	ou available to participate throughout the year, if appointed?		
	YES		
	NO – If no, please explain:		
_	u either reside, own property or represent a business that is located in the Town of		
	YES - If yes, please describe:		
	NO		
APPLICANT SIGNATURE			
By my	y signature below, I confirm that:		
• I consent to the release of the information on my application and understand that it may be made available, on an as-			
needed basis, to Town Council and staff for the sole purpose of making appointments to an advisory board, committee			
or commission, and, if I am appointed, for contacting me regarding meeting-related information.			
 I am willing to accept an appointment to the advisory board, committee or commission for which I have applied and 			
recognize the time commitment required, should I be appointed.			
 I agree to adhere to the bylaws, policies and terms of reference that relate to the advisory board, committee or 			
commission for which I have applied and recognize the responsibilities assumed, should I be appointed.			
• I understand and agree that submitting this application form does not mean I am automatically appointed to a Town of			
Qualicum Beach advisory board, committee or commission.			
Name	e Signature	Date	
A DDI	ICATION CAN DE CURMITTED DY ONE OF THE FOLLOWING METHODS:		
APPLICATION CAN BE SUBMITTED BY ONE OF THE FOLLOWING METHODS:			
IN PERSON: #201-660 Primrose Street, Qualicum Beach, BC - 9:00 am to 4:00 pm, Monday to Friday.			
EMAI	IL: qbtown@qualicumbeach.com		
Thank you for your application. All applicants will be contacted after a decision has been made.			
DEDARTMENT LICE ONLY			
DEPARTMENT USE ONLY			
	Application for posted opening for (insert committee name):		
	Posting for applications closes (insert closing time & date):		
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Personal information on this form is collected under the guidelines of the Freedom of Information and Protection of Privacy Act ("FIPPA") and will only be used for the purpose of administering the Volunteer Application - Advisory Board, Committee or Commission. Questions about this collection can be directed to the Corporate Administrator, Box 130, Qualicum Beach, BC or at 250-752-6921.

☐ Scheduled for CLOSED Council meeting agenda: _____

☐ Applicant notified of the outcome