



Town of Newmarket
395 Mulock Drive
PO Box 328, STN Main
Newmarket, ON L3Y 4X7
info@newmarket.ca

Committee Member Application

All applications must be submitted by **4:30 PM on Friday, January 11, 2019**

Any application received after the deadline date will be held for future consideration.

Send completed forms and any additional materials to the following address:

By e-mail: clerks@newmarket.ca

By mail: Town of Newmarket
395 Mulock Drive
P.O. Box 328, STN Main
Newmarket, ON L3Y 4X7

Applications will also be accepted in person at the Town of Newmarket Municipal Offices, Legislative Services Department, 395 Mulock Drive, Newmarket. Should you have any questions regarding this application, please call Legislative Services at 905-895-5193.

Applicants are strongly encouraged to include a current resume and cover letter.



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Applicant Information

Salutation

Mr. Mrs. Ms. Dr. Other – if other, specify

First Name

Last Name

Address

Address Type: Home Business

Street No.

Street Name

Unit/Suite/Apt

PO Box

City

Province

Postal Code

Telephone

Telephone Number

Extension

Home Business Mobile

Alternate Telephone

Telephone Number

Extension

Home Business Mobile

Email

Are you a resident or owner of property in Newmarket?

Yes No

Are you 18 years of age or older?

Yes No

Are you a Canadian Citizen?

Yes No

Which Committee are you applying for?

(Note: Please complete a separate application if you are interested in applying for more than one Committee.)

Please list any Newmarket Committees you have served on in the past and the dates you served on the Committees.



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Why would you like to participate on this Committee?

Please describe your educational background, professional credentials, or any other relevant training or experience.

Please describe your particular skills, knowledge and experience (work related, community service oriented, or other volunteer activities) that illustrate the interest, skill or ability you could contribute as a member of this Committee.

For Accessibility Advisory Committee applicants *only*:

If you have a disability or connection to someone with a disability please explain the type of disability and how your experience will benefit the Accessibility Advisory Committee.

Please indicate your availability to attend meetings. Please select one or both of the options below.

I am available during business hours (8:30 am to 4:30 pm.)

I am available in the evening

Other



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Committee members are expected to dedicate time to projects outside of regular meeting times. Please indicate how many hours per week you are available below.

I am only available 1-2 hours per week.

I am available 3-5 hours per week.

I am not available any additional hours outside of regular meetings.

Other

You may be invited to attend a short interview to elaborate on your application. Please select one or both of the options below to indicate your availability.

I am available for an interview during business hours (8:30 - 4:30 pm)

I am available for an interview in the evening

Other

Declaration

The personal information on this form is collected under the authority of Section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act. This information will be used to determine eligibility and suitability for appointment to the selected committee. Your complete application will be kept confidential and will be evaluated by an Appointment Committee composed of three members of Council. If selected for appointment your name and the committee you are appointed to will be announced at a Council meeting and will be published on the Town web site. For further information regarding the collection or use of your personal information please contact the Legislative Services Department at clerks@newmarket.ca or 905-953-5300 ext 2203.

I hereby declare that all the information provided in this application is true and correct to the best of my knowledge.
