



Application for Youth Appointment

Township of Scugog Advisory Committees

QUALIFICATIONS

To be eligible to serve on a Committee, Youth Members shall meet the following qualifications:

- Shall reside in the Township of Scugog;
- Must be a secondary school student between the ages of 13 to 18;
- Must include a letter of reference from their school.
- Must include a letter of support from a parent/guardian.

NOTES

- If you wish to apply to several committees, please complete a separate form for each.

APPLICATION

Do you meet the qualifications noted above? Yes No

I am applying to serve on (name of Committee, Board, Task Force, Sub-committee):

Your Name: _____

Mailing Address: _____

E-mail Address: _____

Home Phone: _____ Business Phone: _____

Are you currently serving as a Township of Scugog Youth appointee to an Advisory Committee? Yes No

Years Served _____

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APPLICATION (cont'd)

Please tell the Council about yourself and why you are interested in serving on this committee.

[Please add separate pages if more space is required. A resume can also be attached.]

Please be aware that the application process is not complete until a motion is passed at an official meeting of Council. After Council makes its decision, you will be notified by letter about the outcome of your application. Council meeting dates and agendas are available online at www.scugog.ca.

PRIVACY INFORMATION / YOUR SIGNATURE

By signing or transmitting this application form, you are consenting to the release of the information provided, including attachments. This material will be considered public information and may be made available on a public agenda and/or to the media.

Personal information on this form will be used to assist the Council in selecting appointees for the various civic bodies and is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act. Any questions regarding this collection of information, or the application process, should be directed to Kim Coates, Clerk, at (905) 985-7346. The Council reserves the right to check references and verify information contained on these forms.

Date: _____ Signature of Applicant: _____

Mail to: Township of Scugog, Clerk's Office
181 Perry Street, PO Box 780
Port Perry, Ontario L9L 1A7

Fax: (905) 985-9914
E-mail: kcoates@scugog.ca