

BOARDS & COMMISSIONS APPLICATION FORM

BOARD / COMMI	ISSION APPLYING FOR:						
NAME:							
STREET ADDRE	SS:						
MAIL ADDRESS:	;						
TELEPHONE	(RESIDENCE):	(CELL):					
FAX (optional)	(RESIDENCE):	(BUSINESS):					
EMAIL* (optional))						
*Do you consent to having your email used as a primary method of communication? Yes No							
LENGTH OF RESIDENCE IN REDCLIFF (YEARS):							
WORK EXPERIENCE:							
WHAT SKILLS COULD YOU BRING:							
OTHER COMMUNITY INVOLVEMENT / RELATED ACTIVITIES:							
OTTIER COMMO	NITT INVOLVENIENT / RELATED ACTIVIT	ieo.					
LIODDIEG ODOD	DTO OUT TURN A OTIVITIES PASTIMES						
HOBBIES, SPORTS, CULTURAL ACTIVITIES, PASTIMES, ETC:							

OTHER COMMENTS:					
	LPC		. ,		
You may attach a resume o	r any additiona	l information (2 pa	ges maximum).		
FREEDOM OF INFORMAT	ION & PROTE	CTION OF PRIVA	CY ACT		
If appointed, I authorize that	t the following p	personal information	on may be made publi	C:	
Residence Address:	Yes	No			
Residence phone number:	Yes	No			
Cell Phone:	Yes	No			
Residence fax number:	Yes	No			
Email address:	Yes	No			
Business phone number:	Yes	No			
Business fax number:	Yes	No			
DATE:		SIGNATI	URE:		
Please submit completed ap	oplications to th	ne attention of:			
Bonnie Andres Executive Assistant Town of Redcliff Box 40, #1 – 3 Street NE Redcliff, AB TOJ 2P0					
DI (400)540,0000					

Phone:(403)548-9266 Fax:(403)548-6623 Email: bonnie.andres@redcliff.ca