

CITY OF FORT SASKATCHEWAN APPLICATION FORM APPOINTMENT TO CITY BOARDS/COMMITTEES

Please type or print clearly when completing this form	າ.
Name:	Date:
Address:	Phone: (Res.)
	(Bus.)
Postal Code:	Email
Number of Years a Resident of the City of Fort Saskatchewan:	
Occupation:	Employer:
I am interested in serving on the:	
1	or_or
2	or_or
3	-
Why are you interested in serving as a member on th	is Board/Committee?

What personal goals and objectives would you like to achieve as a member on the Board/Committee you are applying for?

Community involvement:	(If you wish, you may attach a more detailed resume)
Additional information:	
	Signature of Applicant

Please return this form to: Legislative Services Department City of Fort Saskatchewan 10005 – 102 Street Fort Saskatchewan, AB T8L 2C5

E-mail: legislativeservices@fortsask.ca