

GEORGINA

Application for Georgina Heritage Register Review Ad Hoc Working Group

PERSONAL IN	IFORMATION (Please print	or type)					
Title (<i>Mr./Mrs/etc.</i>)		Full Name						
Address								
Municipality			Province	ONTARIO	Postal Code			
Phone			Email					
	Pleas		_	or attending Med	etings?			
Are you a resident or owner or tenant of land in the Town of Georgina? Resident Owner or Tenant of land Neither								
QUALIFICATION	ONS							
	/ Georgina board se board and/or		ımittees that yo	u have served o	n in the past	and the date	es you	
Please specify other organiza	if you have ser	ved on any ot r municipality:	her board, com	nmittee, utility cor	mmission, rat	epayer grou	ıp, or	
	-							

Please describe what you consider your qualifications and experience for this position:	
Please describe how your appointment would benefit the residents of Georgina:	
You are encouraged to enclose a copy of your résumé or a synopsis outlining any ac information you deem important.	Iditional
CONDITIONS OF APPOINTMENT	
I authorize the release of my name to the general public.	☐ Yes ☐ No
Applicant's signature:	_
Applicant forms and supporting documentation can be submitted to the Town of George	gina by EITHER:
Emailing Anna Geniole, <u>ageniole@georgina.ca</u>	
 Dropping a copy off at the Town's municipal offices: 26557 Civic Centre Rd., Kes 	wick
	WIOR
Please direct any inquiries to Anna Geniole, Planning Clerk at 905-476-4305 Ext. 2250	Wick

Personal Information Collection Notice

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, 1990, and will be used to determine eligibility for appointment to Town of Georgina local boards and advisory committees. Questions about this collection of personal information should be directed to the Clerk's Office, 26557 Civic Centre Rd., Georgina, ON L4P 3G1 or by calling 905-476-4305, ext. 2216.