

# Community Involvement APPLICATION FORM



If you are a West Vancouver resident and would like to volunteer to serve on a board, committee or working group, please complete this application form.

|   |  |
|---|--|
| Name of group you are applying for (one per form) |  |
|---|--|

1. Please type or print legibly:

|                                       |      |      |      |
|---------------------------------------|------|------|------|
| <b>Name:</b>                          |      |      |      |
| <b>Address</b> (include postal code): |      |      |      |
| <b>Phone:</b>                         | home | cell | work |
| <b>E-mail:</b>                        |      |      |      |

2. Please describe your interest in this topic:

|  |
|--|
|  |
|--|

3. Are you currently a member of a District board, committee or working group?

Yes  No

4. Please describe your approach to collaborative decision-making / consensus building.

|  |
|--|
|  |
|--|

5. Attach a resume that describes any relevant background, expertise, professional association as well as history of community involvement.

**Community Involvement  
APPLICATION FORM**

**THIS SECTION MUST BE SIGNED BY THE APPLICANT IN ALL CASES**

I, \_\_\_\_\_ hereby confirm that I am willing to accept an appointment to the board, committee, or working group for which I have applied and recognize the commitment required, should I be appointed. I agree to adhere to the bylaws and policies that relate to the board, committee, or working group for which I have applied and recognize the responsibilities assumed, should I be appointed.

Date: \_\_\_\_\_ Applicant's signature: \_\_\_\_\_

The person named as applicant must sign the form to confirm that they would be willing to accept an appointment if selected.

As of January 4, 2022, the District requires that volunteers be fully vaccinated against COVID-19. If I am appointed, I agree to provide proof of my vaccination status.

Yes  No

If I am not appointed, please retain my application for one year for consideration if a vacancy occurs within the year on the board, committee, or working group for which I have applied:

Yes  No

*Freedom of Information and Protection of Privacy Act: personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act section 26(c) and will be used for the purpose of considering applications for membership on District boards, committees, and working groups. If you have any questions about the collection and use of this information please contact Legislative Services, Privacy Officer at 604-921-3497, District of West Vancouver, 750 17th Street, West Vancouver, BC V7V 3T3.*

**Please submit your completed application form with resume:**

**Email:** [committees@westvancouver.ca](mailto:committees@westvancouver.ca)

**Mail:** District of West Vancouver, Legislative Services  
750 17th Street, West Vancouver BC V7V 3T3