



Application for Appointment to the Oshawa Animal Care Advisory Committee

Position Applied For:

Check here for member of the public appointment

Personal Information:

First Name	Last Name	Home Telephone	Business Telephone
Address	City	Postal Code	E-mail Address

Check here for Stakeholder Group appointment

Stakeholder Group Information:

Stakeholder Group		Organization Mandate	
Representative		Business Telephone	Cell Phone
Address	City	Postal Code	E-mail Address

What do you hope to contribute to this Advisory Committee?

Personal information on this form is collected pursuant to Section 11 of the Municipal Act, 2001 and will be used to determine suitability for appointment to a local board or committee. Information contained on this form will be disclosed to members of Oshawa City Council. Questions about this collection should be directed to the City's Information Access and Privacy Officer at 50 Centre Street South, Oshawa, Ontario, L1H 3Z7 or by phone at 905-436-3311.

Experience (☐ Resume attached):

Please describe any of your work-related skills, activities and experience that relate to the appointment being applied for.

Qualifications

Declaration (please read carefully)

Information provided in this application for appointment is treated confidentially. Review all the information you have provided since it will be used to determine your suitability for appointment. Sign and date the declaration below.

I certify that the statements made by me are true and complete to the best of my knowledge. I understand that any misrepresentation made by me in connection with this application will be sufficient cause for rejection of this application. I authorize investigation of all statements contained in this application, and release from liability any person or company furnishing such information.

I understand and agree that all personal information contained within this form will be disclosed to the members of Oshawa City Council, at their request, at any time during the term of any appointment made as a result of this application.

Signature of Applicant	Date

Please submit completed applications to:

City Clerk Services
City of Oshawa

Telephone: 905-436-3311
Email: clerks@oshawa.ca

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