



Please return applications to:

Town of Ponoka
#200, 5604 – 50 Street
Ponoka, AB T4J 1G5
Attention: Chief Administrative Officer
or legislativeservices@ponoka.ca

Committee Vacancy Application

Please complete this form and submit it to the Town Office

Applicant Information

I wish to apply for a position on the _____

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone (res): () _____ Phone (bus): () _____

Email: _____

Are you a citizen of Ponoka District? YES NO

How long have you lived in the Ponoka area? _____ years

Have you ever been convicted of a criminal offense? YES NO

If yes, explain:

Personal Information

Please list your previous volunteer experience:

What interests you in applying for this volunteer position?



Personal Information (Continued)

Will your time commitments allow for additional evening meetings per month if required?

Please explain what you perceive to be the function of this Committee

What attributes do you bring to this position?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to selection, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____

Date: _____

FOIP Disclaimer: This personal information is being collected in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection or use of the personal information provided, please contact the municipality.