

COMMITTEE/ TASK GROUP APPLICATION FORM info@langleycity.ca

604.514.4585

Applicant Name:	Date of Request:
Residential Address:	
Phone: Email:	
Committee/Task Group Choice #1:	
Committee/Task Group Choice #2:	
Member Representation (refer to Terms of Reference for specific positions):	
Name of community group(s) or other organizations with which you are currently affiliated:	
Please describe your relevant background/expertise, volunt any other committees on which you may have served, as it	teer experience, and community involvement, including relates to serving on this committee/ task group:
Please list any relevant special training, courses, certification	on designations or education:
Please share your reasons for, or interest in, serving on this	s committee/task group:
Please describe how you can contribute to this committee/t	ask group:
Please provide any additional comments you wish to share	regarding your application:

■ Download the fillable form to your device, save, and email the completed form to info@langleycity.ca