



INDIVIDUAL APPLICATION FOR A CITY APPOINTMENT TO A COMMITTEE OR BOARD

The City is Seeking Applications for the Victoria Board of Variance.

Applications can be submitted in person to the Legislative Services Division, or by mail to Corporate Administrator, City of Victoria, No. 1 Centennial Square, Victoria, BC, V8W 1P6. For further information, contact Ms Ming Moodrey, Corporate Administration Secretary, Legislative Services Division, at Telephone: 250-361-0346, Fax: 250-361-0348, and/or e-mail: mmoodrey@victoria.ca The deadline for the submission of all applications to City Hall is 4:30 pm, Friday, July 16, 2010. Application forms are also available on the City of Victoria website at www.victoria.ca

A. CANDIDATE'S INFORMATION (Use Black Pen or Type Information – Please Print Legibly)

1. Name _____
2. Address _____
3. City _____ Province _____ Postal Code _____
4. Home Phone No. _____ Work Phone No. _____ Cellular No. _____
Fax No. _____ E-Mail Address _____

5. Reasons for Seeking Appointment

6. Special Background or Expertise

7. History of Community Involvement (Past and Present)

(If space is insufficient, please attach a separate sheet.) (Please complete and sign 'Side 2' of the Application)



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8. Additional Information

Four horizontal lines for additional information.

9. Declaration and Consent of the Applicant

I solemnly declare that I am eligible to be appointed to the Commission or Advisory Committee(s) indicated above, as I am not an elected official, officer or employee of The Corporation of the City of Victoria.

I solemnly declare the following direct and/or indirect pecuniary interest* arising from a business relationship with The Corporation of the City of Victoria.

Horizontal line for pecuniary interest declaration.

(State the Nature of the Pecuniary Interest)

(*A direct pecuniary interest is a financial gain or loss that accrues to the applicant. An indirect pecuniary interest is a financial gain or loss that accrues to the applicant's family or household.)

I am willing to accept an appointment by the City of Victoria Council to the Commission or Advisory Committee(s) specified in this application.

*SIGNATURE OF APPLICANT _____ DATE: _____

NAME OF APPLICANT (Please Print) _____

B. NOMINATING ORGANIZATION INFORMATION (If Application is Submitted by an Organization)

Name of Organization: _____

Address of Organization: _____

Name Of Organization Representative _____

Signature Of Organization Representative _____

Date: _____

Reason Why Organization Is Recommending Candidate For Appointment

Four horizontal lines for reason why organization is recommending candidate.

The information from the applications is collected for administrative and/or operational functions of the City of Victoria as authorized by the Local Government Act. This information has been collected, and will be used and maintained, in accordance with the Freedom of Information and Protection of Privacy Act.

*Please sign the Declaration in the appropriate space provided on this page.

(If space is insufficient, please attach a separate sheet)