

Contact Information – Please Print:

Name:			
	(last name)		(first name or name known by)
Address:			
	Apartment/Unit #	PO Box	Rural Route
	City/Town		Postal Code
Telephone:	Home		Cell
	Work		
Email address:			

General Information
What is your preferred method of contact? <input type="checkbox"/> Email <input type="checkbox"/> Phone
Are you the owner or tenant of land or the spouse of an owner or tenant of land in the Municipality of Chatham-Kent? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No

Committee Information
Do you have knowledge and/or experience with Municipal governance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have knowledge and/or experience with remuneration structures? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have experience with strategic thinking, decision-making skills, leadership and influence? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a college certificate/diploma or university degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
If no, have you taken any relevant courses? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please list the courses.

**NOTE: YOU MAY ALSO ATTACH ADDITIONAL RESPONSES IF MORE SPACE IS REQUIRED.
APPLICANTS ARE ENCOURAGED TO INCLUDE A COVERLETTER AND/OR RESUME.**

Committee Involvement

List all Boards/Committee(s) of which you have served as a member in the past 5 years. Briefly state your reasons and interest in applying for appointment to the Committee and what you believe you can contribute.

What is your knowledge or experience with remuneration structures.

What is your background/qualifications/experience/expertise that is relevant to this Committee?

OVER

References:

Please include the names and contact number(s) of three (3) references that may be contacted respecting your application.

Name	Contact Number(s)
1.	
2.	
3.	

Outreach Initiatives

How did you learn about this position? (please check all that apply)

- ☐ Newspaper
☐ Municipal Website
☐ Through a Community Organization
☐ Word of Mouth
☐ other (please specify)

Declaration (please read carefully)

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.

Completed by: (print name)	
Date completed:	
Signature:	

Application Deadline

Please return your completed application and attachments to:

Judy Smith, Clerk
Municipality of Chatham-Kent
315 King St. W, P.O. Box 640
Chatham ON N7M 5K8

ckclerk@chatham-Kent.ca

no later than 4:30 p.m. on the application deadline date of October 17, 2025.

Personal information, as defined by Section 2(1) of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) is collected under the authority of the Municipal Act, 2001, and in accordance with the provisions of the MFIPPA. Personal information on this form will be used to assess the candidate's qualifications for appointment to one of the various committees or boards. Personal information may form part of meeting agendas and minutes and therefore may be made available to members of the public at the meetings, through requests, and through the website of the Corporation of the Municipality of Chatham-Kent. Questions regarding the collection, use, and disclosure of this personal information may be directed to the Freedom of Information Coordinator, Clerk's Office, 315 King St. P.O. Box 640, Chatham On N7M 5K8, 519.360.1998