



**Citizen Application For  
Boards, Committees, Commissions**

Name \_\_\_\_\_

Civic Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone # (Home) \_\_\_\_\_ Phone # (Work) \_\_\_\_\_

E-Mail \_\_\_\_\_

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Please indicate the Committee for which you are applying:

\_\_\_\_\_

Relevant experience and background that you would bring to the position for which you are applying:

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please send your application to:**

**Municipality of the District of Digby  
PO Box 429  
Digby, NS B0V 1A0**

**OR**

**Faxed to 245-5748 or e-mailed to [trobins@digbymun.ca](mailto:trobins@digbymun.ca)**