

Accessibility Advisory Committee

Application Form

Applicant Name

Street Address

Postal Code

Telephone

Email Address

Describe how your lived experience, community involvement, education, work, and/or past committee involvement might be helpful to this committee:

Why are you interested in serving on this committee?

What contribution do you believe you can make to this committee?

What experience do you have in exchanging your views with others and in appreciating and respecting the skills, abilities and knowledge of others?

Are you a person with a disability, or do you represent an organization representing people with disabilities?

Yes

No

Note: At least one half of the members of the Accessibility Advisory Committee must have a disability or represent an organization that represents people with disabilities. Members with a variety of disabilities will bring diverse perspectives to this committee. We will strive to accommodate all members to ensure they are able to fully participate.

Organization/sector you are representing (if applicable): If you are a person with a disability or represent an organization representing people with disabilities, what disability/disabilities do you or your organization represent?

Are you interested in an interview?

Yes

No

The final approval of appointments is given by the councils for the Municipality of Digby and the Town of Digby.

If you would like more information about the approval process or the committee please contact Tyler Pulley, Manager of Municipal Services, at 902-245-5331 or tpulley@digbymun.ca

This form should be emailed to tpulley@digbymun.ca, faxed to 902-245-5748 or dropped off at the Municipal Office located at 12548 Hwy 217 in Digby.

Applicant Signature

Date