

## Citizen Appointments to Boards and Committees APPLICATION FORM Created: May 2021

For office use only: Closing Date:\_ Council Appointment Date: \_\_\_\_\_ Term: \_\_\_\_\_\_ to

\_\_\_Appl Rec'd:

Notification 60 days prior to term expiring:

### AGENCY, BOARD, COMMITTEE OR COMMISSION: Accessibility Advisory Committee

The purpose of the committee is to provide advice to Municipal Council through Committee of the Whole in identifying, preventing, and eliminating barriers to people with disabilities in municipal programs, services, initiatives, and facilities. Committee will play a pivotal role in helping the County to become an accessible community. It will work to develop a fiveyear Municipal Accessibility Plan to meet the County's obligations under the Nova Scotia Accessibility Act known as Bill 59.

Applicants must have no outstanding taxes, fees, charges or liens owing to the Municipality at the time of appointment. Applicants must demonstrate the ability to be impartial, fair, objective and courteous at all times.

<u>Please attach a resume</u> outlining any experiences, skills or qualifications that you feel are relevant and that you would bring to the committee(s) to which you are applying. COMPLETE THE APPLICATION IN ITS ENTIRETY.

NAME (Full - First/Last):

AGE: I confirm I am the full age of 18 years YES

CIVIC ADDRESS (include Postal Code):

MAILING ADDRESS (include Postal Code):

E-MAIL:

**CONTACT NUMBERS:** Daytime Phone #

Cellular Phone #

#### LENGTH OF RESIDENCE IN MUNICIPALITY OF THE COUNTY OF ANNAPOLIS:

#### SELF-IDENTIFICATION (OPTIONAL):

We are committed to ensuring the communities we serve are represented, and welcome applications from racially visible persons, persons with disabilities, members of other traditionally under-represented groups. If you wish, you may self-identify by selecting one or more of the following options:

- Indigenous
- Black / African Nova Scotian
- Other minority
- Person with Disability
  Disability Type (vision, hearing, mobility, etc)
- 1. Are you a person with a disability? Yes If Yes, please describe

[ ] Women

- ] Newcomer / Immigrant
- ( ) Youth (30 and under)
- ) 2SLGBTQ+

No



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No

2. Are you a person from an organization representing persons with disabilites? Yes If yes, what disability or disabilities does your organization represent?

3. What past involvement or contributions have you made on a similar committee or organization that is working in this area?

4. Describe how your lived experience, community involvement, education, work, or other experience may be helpful to this committee. *NOTE:* persons with a variety of life experiences and with expertise, lived or learned, regarding specific disabilities will bring knowledge and practicality to the committee. Diversity is important and we will strive to accommodate all persons to ensure they are able to fully participate.

By submitting your application, you are authorizing the Municipality of the County of Annapolis to provide your qualifications to the Nominating Committee and evaluators as required to fill the citizen vacancy.

Signature

Date

DD MONTH YYYY

Applications must be submitted by 12 Noon on Thursday, MAY 27th, 2021 to:

Debra Ryan, Recreation Manager, Municipality of the County of Annapolis DROP BOX: 752 St George Street, P.O. Box 100, Annapolis Royal, NS BOS 1A0 E-mail: dryan@annapoliscounty.ca | Fax: 902-532-2096

All applicants will be notified following the decision of Council For clarification or questions, please contact <u>dryan@annapoliscounty.ca</u> | 902-665-5010