

Volunteer – Committee Member Application Form

Name:		
Address (including postal code):		
Home Phone:	Alternate Phone:	
Email:		
Committee Preference and Supporting Informa	ation	
Please outline the Committee(s) you would like t interest which outlines why you should be appoir must be attached to this application.	o sit on. Please note a résumé d	•
Volunteer Experience		
Do you have any experience volunteering? If Yes, in what capacity:	YES	NO
Accommodation We want to ensure persons with disabilities are a have a disability what accommodations if any and a second secon		
have a disability, what accommodations, if any, v	vould you need to carry out trils	position?
Additional Information		
Please provide any additional information which	may be of assistance in the sele	ction process.
Applicants Signature:	Date:	

Township of Uxbridge documents are available in alternate formats upon request. Please fill out the Accessibility Request for Alternate Formats Form at www.uxbridge.ca or contact the Accessibility Coordinator at 905-852-9181 ext. 209 or at accessibility@uxbridge.ca.

The Township of Uxbridge is an Equal Opportunity Employer that is dedicated to an inclusive, barrier-free recruitment and selection process. The Township is committed to diversity, equity, and inclusion within its community and organization, and welcomes and encourages applications from Indigenous Peoples, people of colour, women, persons who live with disabilities, people from 2SLGBTQI+ communities, and people from diverse communities. When requested, the Township of Uxbridge will accommodate applicants throughout the recruitment and selection and/or assessment process, pursuant to the Ontario Human Rights Code. These commitments also apply to our Board and Committee recruitment and selection processes.

Personal information is collected in accordance with the Municipal Freedom of Information and Protection of Privacy Act.