



**REASON FOR SEEKING APPOINTMENT**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

I, \_\_\_\_\_, hereby signify that I am willing to accept an appointment to the Committee named herein, should I be appointed to such by the Council of the City of Penticton.

\_\_\_\_\_  
Applicant's Signature

**Please submit completed applications to [committees@penticton.ca](mailto:committees@penticton.ca) or via fax 250-490-2402. If you have any questions, please call 250-490-2473.**

Information collected on this form is done so under the authority of the *Freedom of Information and Protection of Privacy Act* (FOIPPA), and is protected in accordance with FOIPPA. Personal information will only be used by authorized staff to fulfill the purpose for which it was originally collected, or for a use consistent with that purpose. For further information regarding the collection, use, or disclosure of personal information, please contact the Corporate Services Department at 250-490-2400.