

COUNCIL VACANCY APPLICATION FORM

DECLARATION OF QUALIFICATION

I, _____, an applicant mentioned in this application form, declare that I am presently legally qualified, or would be presently legally qualified if I were not a member of the Legislative Assembly of Ontario or the Senate or House of Commons of Canada, to be appointed and to hold the office to which I have applied for appointment and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

DECLARED before me at the Township of Wollaston, in the County of Hastings, this _____ day of _____, 20_____.

Signature of Applicant

Signature of Clerk or Commissioner

Received By:

DATE: YEAR/MONTH/DAY

CERTIFICATE

I, the undersigned Clerk of this municipality, do hereby certify that I have examined the application form of the aforesaid applicant filed with me and am satisfied that the nominee is qualified for appointment to municipal office.

Signature of Clerk or Designate

DATE CERTIFIED:
YEAR/MONTH/DAY

Personal information collected on this form is pursuant to the *Municipal Act* and is collected in accordance with the *Municipal Freedom of Information and Protection of Privacy Act* and will be used for the purpose of determining a nominee's eligibility for appointment to municipal office. This application form will be attached to a Special Council Appointment Meeting agenda and posted on the Township website. Questions can be directed to the Clerk.