

Committee Member Application

All applications must be submitted by 4:30 PM on Friday, October 4, 2024.

Applications received after the deadline date and unsuccessful applicants will be held for 6 months future consideration.

Send completed forms and any additional materials to the following address:

By e-mail: clerks@newmarket.ca

By mail: Town of Newmarket

395 Mulock Drive

P.O. Box 328, STN Main Newmarket, ON L3Y 4X7

Applications will also be accepted in person at the Town of Newmarket Municipal Offices, Legislative Services Department, 395 Mulock Drive, Newmarket.

Should you have any questions regarding this application, please call Legislative Services at 905-953-5300 x 2210 or by emailing clerks@newmarket.ca.

Applicants are strongly encouraged to include a current resume and cover letter.



Committee Member Application

* Required Information

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| First Name/Single Name* | | | Last Name | | | |
| | | | | | | |
| | | | | | | |
| Home | Business | | | | | |
| Street Name | | | | | | Unit/Suite/Apt |
| City | | | | Province | Postal Cod | de |
| | Telephone N | | | mber* Extension | | Extension |
| Business | Mobile | | | | | |
| Alternate Telephone | | | Telephone Number | | | Extension |
| Business | Mobile | | | | | |
| | | | | | | |
| Are you a resident or owner of property in Newmarket?* | | | * 4 | Are you 18 years of age or older?* | | |
| No | | | | Yes | No | |
| Which Committee are you applying for?* | | | | | | |
| Please list any additional committees you are applying for below: | | | | | | |
| Please list any Newmarket Committees you have served on in the past and the dates you served on the Committees.* | | | | | | |
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| | Home Street Name City Business ne Business nt or owner of pro No e are you applying Iditional committe | Home Street Name City Business Mobile Business Mobile Business Mobile At or owner of property in New No are you applying for?* Iditional committees you are | Home Busin Street Name City Business Mobile Telephon Business Mobile It or owner of property in Newmarket? No are you applying for?* Iditional committees you are applying to the service of the ser | Home Business Street Name City Telephone Nu Business Mobile Telephone Nu Business Mobile Telephone Nu Business Mobile Telephone Nu Business Mobile At or owner of property in Newmarket?* No are you applying for?* Iditional committees you are applying for business you have served of | Home Business Street Name City Province Telephone Number* Business Mobile Telephone Number Business Mobile Telephone Number Are you 18 year yes are you applying for?* Iditional committees you are applying for below: | Home Business Street Name City Province Postal Cod Telephone Number* Business Mobile Telephone Number Business Mobile Telephone Number Are you 18 years of age or Yes No are you applying for?* Iditional committees you are applying for below: |



Committee Member Application

Why would you like to participate on this Committee?* Please describe your educational background, professional credentials, or any other relevant training or experience.* Please describe your particular skills, knowledge and experience (work related, community service oriented, or other volunteer activities) that illustrate the interest, skill or ability you could contribute as a member of this Committee.* For Accessibility Advisory Committee applicants: As you are comfortable, please explain how your lived experience will benefit the Accessibility Advisory Committee Please indicate your availability to attend meetings. Please select one or both of the options below.* I am available during business hours (8:30 am to 4:30 pm.) I am available in the evening Other

For Newmarket Public Library Applicants only:

Please include any knowledge regarding marketing and communications, technology / digital, advocacy, fundraising, public education, community development / planning, or public policy experience.



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Committee members are expected to dedicate time to projects outside of regular meeting times. Please indicate how many hours per week you are available below.*

I am only available 1-2 hours per week.

I am available 3-5 hours per week.

I am not available any additional hours outside of regular meetings.

Other

You may be invited to attend a short interview to elaborate on your application. Please select one or both of the options below to indicate your availability.*

I am available for an interview during business hours (8:30 - 4:30 pm)

I am available for an interview in the evening

Other

Voluntary Equity, Diversity, and Inclusion Information

The Town of Newmarket is committed to advancing equity, diversity, and inclusion. The Town encourages Indigenous, racialized persons, persons with disabilities, women, and gender diverse persons, and members of other equity seeking groups to apply, and to voluntarily include information on how their experience and perspectives can strengthen their application. The voluntary self-identification information collected will be confidential but not anonymous and accessible on a need to know basis for the purpose of understanding the composition of the Town's Committees and Boards.

In addition, information collected on self-identification will assist the Office of the Town Clerk to monitor indicators of the number of candidates from diverse backgrounds who applied. This information is voluntary and by filing out this information you consent that the information may be used throughout the committee selection process and for aggregate data collection purposes. Information collected under the authority of Section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act.

The Town of Newmarket recognizes that many genders exist. This identity may or may not align with the gender typically associated with their sex. While people may identify with one or more options below, the current form can only receive one response. Please chose the one option with which you most closely identify.

Open text field:

Aboriginal peoples or Indigenous peoples are persons who are First Nations, Inuit or Métis. Based on this definition, are you an Aboriginal/Indigenous person? You may also indicate additional information about your indigeneity or that you prefer not to disclose this information.

Open text field:



Committee Member Application

Members of the 2SLGBTQIA+ communities have diverse sexual orientations and identities. Do you consider yourself Two-spirited, Lesbian, Gay, Bi-sexual, Trans, and/or Queer (a member of the 2SLGBTQIA+ community)? You may also indicate your orientation/identity or that you prefer not to disclose this information.

Open text field:

The Ontario Human Rights Commission has described "race", "as socially constructed differences among people based on characteristics such as accent, manner of speech, name, clothing, diet, beliefs and practices, leisure activities, place of origin and so forth. The process of social construction of race is called racialization: "the process by which societies construct races as real, difference, and unequal in ways that matter to economic, political, and social life." There are many ways in which people may identify and people may identify in more than one way. Here are some examples: Black, Jewish, Muslim, Chinese, and South East Asian.

You may indicate your racial identity or that you prefer not to disclose this information:

Declaration

The personal information on this form is collected under the authority of Section 28(2) of the Municipal Freedom of Information and Protection of Privacy Act. this information will be used to determine eligibility and suitability for appointment to the selected committee. Your complete application will be kept confidential and will be evaluated by an Appointment Committee composed of three members of Council. If selected for appointment your name and the committee you are appointed to will be announced at a Council meeting and will be published on the Town web site. For further information regarding the collection or use of your personal information please contact the Legislative Services Department at clerks@newmarket.ca or 905-953-5300 ext 2203.

I hereby declare that all the information provided in this application is true and correct to the best of my knowledge.