



PLEASE PRINT

OCC - Advisory Committee / Experts Panel Application

Office of the City Clerk

ADVISORY COMMITTEE / EXPERTS PANEL APPLICATION

Contact Information

SECTION 1

Full Name \_\_\_\_\_

Full Mailing Address \_\_\_\_\_

Telephone (Primary) \_\_\_\_\_ (Alternate) \_\_\_\_\_

Email \_\_\_\_\_

Organization/Sector (if applicable) \_\_\_\_\_

Profession/Job Title (if applicable) \_\_\_\_\_

Membership Information

SECTION 2

1. Select the Advisory Committee on which you would like to serve (one application per Committee).

Youth Advisory Committee

Inclusion Advisory Committee

Arts and Culture Advisory Committee

Seniors Advisory Committee

Downtown Advisory Committee

Bike St. John's Advisory Committee

Environmental & Sustainability Experts Panel

Built Heritage Experts Panel

2. Select in which capacity you are interested in serving on an Advisory Committee / Experts Panel.

Resident

Organization (decision making authority preferred)

Youth Representative

Note: If representing an organization, a letter of endorsement must be provided by the organization being represented.

3. Please select your age range. Mandatory for applicants seeking to serve on an advisory committee as the youth representative (between the ages of 19 and 35) or members of the Senior or Youth Advisory Committees.

14 - 29 years old

30 - 43 years old

55 and over

Decline



NEWFOUNDLAND AND LABRADOR, CANADA

4. Mandatory for applicants 14 – 29 years old applying to the Youth Advisory Committee.

School Name \_\_\_\_\_

Junior High (Grade)\_\_\_\_\_ High School (Grade)\_\_\_\_\_ Post-Secondary (Years)\_\_\_\_\_

5. Are you currently, or have you previously been, a member of any City committees/panels/boards? If so, please list the committee name(s) and the date(s) of service.

Questions (feel free to attach a resume with your application)

**SECTION 4**

Based on the purpose of the Advisory Committee / Experts Panel outlined in the terms of reference, why would you like to serve on this Committee / Panel? What aspects of the Committee's / Panel's purpose are of interest to you?

Tell us how your knowledge, skills, and abilities make you an ideal candidate to serve on this Advisory Committee / Experts Panel.

Please provide your previous/current work, community service, or other volunteer activities and interests that may be related to the purpose of the Advisory Committee / Experts Panel.

What else can you tell us about yourself or your organization that supports your application?

**Eligibility**

Preference will be given to residents of St. John’s. Organizational representatives must have a connection to the purpose of the Advisory Committee / Experts Panel. Exceptions may be made by the selecting body as appropriate.

**Commitment to Equity and Inclusiveness**

The City of St. John’s is strongly committed to equity and inclusiveness. In selecting Advisory Committee / Experts Panel members, the City will aim to design processes that are transparent, accessible, free of discrimination and seek to remove barriers.

**Selection Information**

In addition to eligibility requirements, the specific skills and experiences of an applicant will be important factors in Committee / Panel selection. While all residents who meet the Eligibility Requirements are encouraged to apply, those who have demonstrated experience with groups or initiatives that have goals consistent with the Advisory Committee / Experts Panel, as outlined in its [Terms of Reference](#), will be given preference.

Advisory Committees and Experts Panels are only one way the City engages with residents. Where applicable the City also uses other tools to gain perspectives and input.

For more information on public engagement in the City of St. John's and to find out how to get involved or learn about what's coming up, check out the engagement page on the City's website or check out the City's [Engage! St. John's](#) online engagement community and connect with us on [Twitter](#) and [Facebook](#).

References (must be non-family members)

**SECTION 7**

|                           | Reference #1 | Reference #2 |
|---------------------------|--------------|--------------|
| Name                      |              |              |
| Occupation / Job Title    |              |              |
| Relationship to Applicant |              |              |
| Primary Phone             |              |              |
| Secondary Phone           |              |              |
| Email                     |              |              |
| Date                      |              |              |
| Signature                 |              |              |

**Declaration**

**SECTION 8**

By signing this application, I hereby acknowledge and agree to the following:

- I grant permission for City staff to take appropriate action to assist me in the event of an emergency.
- I acknowledge that any/all photograph(s) of me taken or provided in my capacity as a volunteer may be used in professional materials (i.e. print, website, television) and that I will not be compensated for the use of such photograph(s). I further acknowledge that the City may change the image through cropping or digital manipulation.
- I will not disclose any sensitive and/or private information to unauthorized persons that I may obtain in my capacity as a volunteer, either after or during my term. I fully understand that such a breach may result in suspension or dismissal as an advisory committee / experts panel member.
- I grant permission for the City to publish/post my name on any/all documentation associated with the advisory committee / experts panel including the City's website.
- I grant permission for the City to share my email with the other members of the advisory committee / experts panel, including staff.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Additional Information**

**SECTION 9**

Those who are selected to serve on an Advisory Committees / Experts Panel will be notified by email. Applications will be kept on file for up to two years and will be reviewed in the event that a position becomes available.

**Note:** Please include any relevant certifications and accreditations with your application.

**ENSURE THAT YOU HAVE COMPLETED ALL SECTIONS AND ENCLOSED ALL REQUESTED DOCUMENTATION. INCOMPLETE APPLICATIONS WILL BE CONSIDERED INELIGIBLE.**

**SUBMIT**

**Privacy Notice**

**SECTION 10**

Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your application. Questions about the collection and use of the information may be directed the City Clerk by telephone: 709-576-8202 or email: [cityclerk@stjohns.ca](mailto:cityclerk@stjohns.ca).

**Please send completed form to:**  
 Office of the City Clerk  
 P.O. Box 908, 10 New Gower Street  
 St. John's, NL A1C 5M2

**Or hand deliver to:**  
 Office of the City Clerk  
 Fourth Floor, City Hall  
 Office Hours: 9:00 AM – 4:30 PM

**Or email to:** [cityclerk@stjohns.ca](mailto:cityclerk@stjohns.ca)

**Inquires please call:** (709) 576-8229



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