

Member Application Form

1. Name:

2. Home Address (street address, city, postal code):

3. Contact Information Please indicate your preferred contact number using the check box:

(Home Phone) _____ (Work Phone) _____ (Cell) _____

(Email) _____

5. Your age group: < 18 18 - 30 31 - 50 51 - 64 65 +

6. Tell us why you would like to serve as a member of the Edmonton Food Council.

7. Please identify which membership group(s) you represent, based on *Section 2* of the Edmonton Food Council's *Terms of Reference*. Please also clarify your role(s) and how you represent the group(s) that you have listed. For example, if you list "Education" you may also want to identify that you are a high school teacher or University professor.

8. In *Section 2* of the *Terms of Reference* there is a list of skills and attributes that are desired on the Edmonton Food Council. Please check the skills or attributes that you possess.

- Passion for local food and Edmonton
- Knowledge of and expertise in the food system
- Experience working within the food and agriculture sector
- Outstanding leadership capacity
- Knowledge of governance models and experience working with boards
- Ability to deliver results
- Relationship-building skills
- Influence in the community
- Research and evaluation capacity
- Financing, accounting, economic, and funding capacities
- Ability for networking and facilitating
- Willingness to be progressive and innovative

9. Please describe any relevant additional experience, knowledge and expertise that you would bring to the role of an Edmonton Food Council member.

10. What would you like to accomplish by the end of your term as an Edmonton Food Council member?

11. Do you have any real or perceived conflict of interest with serving on the Edmonton Food Council?

12. How did you learn about this vacancy?

Website Print Publication Email Word of Mouth Other (please indicate)

13. Applicants are required to submit:

Completed Application Form Resume 2 Letters of Reference*

**References should comment on the relevant qualities, skills or knowledge that you possess*

14. By checking this box I declare that the information provided in this application is correct and complete to the best of my knowledge. I understand that false information given or any relevant information withheld will result in the denial of my application.

(Name) _____ (Date) _____

This personal information is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used throughout the recruitment process. If appointed to a civic agency, this information will be provided to the agency and kept on file during your term of appointment. It is protected by the privacy provisions of the *Act*. If you have any questions about the collection contact Sustainable Development.

The deadline for applications is: 11:59 PM April 30, 2018. Please email or mail completed applications to:

Kathryn Lennon, Principal Planner
City Planning Branch
7th Floor, Edmonton Tower
10111-104 Avenue
Edmonton, AB T5J 0J4
Phone: 780-442-0258
Email: kathryn.lennon@edmonton.ca

Recruitment Information and Timeline:

- ✿ Please refer to www.edmontonfoodcouncil.org for more information on the Edmonton Food Council, including the *Terms of Reference*. Please read the *Terms of Reference* before filling out this form.
- ✿ All applicants will be contacted regarding the status of their applications.
- ✿ In support of the City's paperless strategy, correspondence with applicants will be by email.
- ✿ Appointments will be made in July.
- ✿ Council members will be appointed for three year terms.
- ✿ A brief biography of appointed Edmonton Food Council members will be shared publicly.

