

APPLICATION FOR COMMITTEE NOMINATIONS

Applicant Name:				Date:			
Address:			City	Date: City/Town:			
Territory/Province:			Postal Code: (H) Fax:				
Telephone: (W)		(H) _		Fax:			
Email:							
Email: Citizen Non-Citizen First Nation:							
Occi	ipation:						
					STED IN SERVING ON? e your preference.)		
	SFN Gov	vernment Committ	ees:	V			
	SFN Citi	zenship Committee			SFN Finance Committee		
	SEN I on	ds Committee			SFN Constitution Committee		
		cation Committee			SI'IV Constitution Committee		
						_	
	_	articipation on Boa e number of years:	ords, Co	mmi	ttees or Councils have you served on?		
						_	
						_	
					k history and relevant education, which or attach your resume:	1	
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Why are you interested in this Committee? If you have checked off more than one board, please explain why for each of the boards.
Are you familiar with the Umbrella Final Agreements? YES NO Are you willing to undertake training to learn the Agreements? YES NO
In the selection process, can we share your application and resume with SFN Senior Management and Council? YES NO
Can you provide a criminal record check if requested? YESNO
Are you currently employed? YES NO If yes, can you please attach a letter from that employer supporting your nomination? YESNO
Any other comments:
Applicant Signature:
Date:
PLEASE ATTACH RESUME WITH APPLICATION FORM
Receive Date: Complete Review Decision: