



**COLUMBIA SHUSWAP
REGIONAL DISTRICT**

CSR D Waterworks Advisory Committee

EXPRESSION OF INTEREST FORM

| | | | | | |
|--|--|--------------|--------------|--------------|-------------|
| Name: | | | | | |
| Address: | | | | | |
| Phone Numbers: | <table border="0"> <tr> <td><i>Home:</i></td> <td><i>Work:</i></td> </tr> <tr> <td><i>Cell:</i></td> <td><i>Fax:</i></td> </tr> </table> | <i>Home:</i> | <i>Work:</i> | <i>Cell:</i> | <i>Fax:</i> |
| <i>Home:</i> | <i>Work:</i> | | | | |
| <i>Cell:</i> | <i>Fax:</i> | | | | |
| Email Address: | | | | | |
| Current Occupation: | | | | | |
| Experience (including work background, community activities, volunteering, etc.): | | | | | |
| Education (including formal education or training, certificates, completed courses, etc.) | | | | | |

Thank you for your submission

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|---|--|
| <p><i>What skills, abilities and specialized knowledge do you have that will assist this advisory committee?</i></p> | |
| <p><i>Why are you interested in serving on this advisory committee?</i></p> | |
| <p><i>What contribution do you believe you can make?</i></p> | |
| <p><i>What past contributions have you made to a similar group or organization?</i></p> | |
| <p><i>What experience do you have in exchanging your views with others and in appreciating and respecting the skills, abilities and knowledge of others?</i></p> | |

EXPRESSIONS OF INTEREST WILL BE ACCEPTED UNTIL MARCH 31, 2010.

Please forward completed forms to the Columbia Shuswap Regional District:
By Mail to PO Box 978, Salmon Arm BC V1E 4P1
Or Fax to (250) 832-8165 Or Email to cblack@csrd.bc.ca