Town of Woodstock 824 Main Street Woodstock, NB E7M 2E8



Phone: (506)325-4600 Fax: (506) 325-4308

E-mail: townhall@WoodstockNB.ca

Expression of Interest to Volunteer for the Town of Woodstock Planning Advisory Committee

Personal Informa	ation:		
Name:			
(last)	(1	first)	(middle)
Mailing Address	:		
Telephone:		Email:	
What Ward Do y	ou Reside In:		
Please list Qualif your resume as v	_	would help you serv	re as a member. (You may attach
Reason for Apply Why would you lik	y ing: e to serve on the Planning	Advisory Committee?	
Community Invol What current or po	vement: ast participation have you h	had within the town?	
References: Pleas Name	se provide references that Position	t are familiar with yo Address	our work and/or abilities: Telephone No.
complete to the be	est of my knowledge and	I authorize the Town	in this application are true & a of Woodstock to use this the Village Planning Advisory
Signatura		Date	20