

PLEASE PROVIDE TWO (2) PROFESSIONAL REFERENCES.

NAME:	PHONE NUMBER:	EMAIL ADDRESS:

The personal information in this application is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, please contact the Secretary-Treasurer's Office at 604.792.1321.

I am not an employee or board member of an organization receiving funding from the Chilliwack School

I will be available for meetings between the hours of 4:00 p.m. and 6:00 p.m.

Please return this form to the: Secretary-	
Treasurer's Office	
8430 Cessna Drive	(Signature of Applicant)
Chilliwack, B.C.	
V2P 7K4	
or by email to cathy_meeres@sd33.bc.ca	(Date)
By 12:00 pm, May 17, 2019	