



1-500 Lower Ganges Road, Salt Spring Island, BC V8K 2N8  
Telephone: **250-537-9114**  
Fax: 250-537-9116  
Toll Free via Enquiry BC in Vancouver: 604-660-2421  
Elsewhere in British Columbia: **1-800-663-7867**  
Email: [ssiinfo@islandstrust.bc.ca](mailto:ssiinfo@islandstrust.bc.ca)  
Website: [www.islandstrust.bc.ca](http://www.islandstrust.bc.ca)

## Application: Advisory Planning Commission/Board of Variance

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**Please indicate the Commission you are interested in joining (check all that apply):**

Agricultural Advisory Planning Commission     Advisory Planning Commission     Board of Variance

**If applying for the Advisory Planning Commission, please indicate your area of specialization:**

Planning/Development/Public Administration                       Environmental Sciences  
 Urban Design/Architecture     General (at-large)

**Please explain interest in seeking an appointment:**

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**Please describe relevant background and experience (resumes are encouraged as attachments):**

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**Please describe any similar community involvement:**

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**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

*Note: The personal information on this form is collected pursuant to the Freedom of Information and Protection of Privacy Act and the Local Government Act and will only be used for processing your application.*