

Liard First Nation

COMMITTEE APPLICATION (CHECK BOX OF COMMITTEE APPLYING FOR)
(HOUSING-___; ELECTIONS-___; MEMBERSHIP-___; CONSTITUTION-___)

Application information

Full name:	_____	Date:	_____
	<i>Last</i> <i>First</i> <i>M.I.</i>		
Address:	_____	Phone:	_____
	<i>Street address</i> <i>Apt/Unit #</i>		
	_____	Email:	_____
	<i>City</i> <i>Province</i> <i>Postal ODE</i>		

Committee Request _____

Are you willing to supply an RCMP background check? Yes No If no, explain please _____

Relevant Experience:

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____