



COLUMBIA SHUSWAP REGIONAL DISTRICT

PO Box 978, 555 Harbourfront Drive NE, Salmon Arm, BC V1E 4P1 | T: 250.832.8194 | TF: 1.888.248.2773 | www.csr.bc.ca

SOLID WASTE PLAN MONITORING ADVISORY COMMITTEE EXPRESSION OF INTEREST FORM

Electoral Area: A C D E F	Current Committee Member?
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Name:	
Address:	
Phone Numbers:	<i>Home:</i> <i>Work:</i> <i>Cell:</i>
Email Address:	
Experience and Education: (including work, background, community activities, volunteering, training, certificates, etc.)	
Please tell us the reason(s) for your interest in serving on this plan monitoring advisory committee (PMAC).	

<p>Are you a current or past member of any similar community organization? If yes, please list them and your role in each.</p>	
<p>Please provide any additional information about yourself, your activities or interests that would be relevant in serving on the plan monitoring advisory committee (PMAC).</p>	

Email completed form to operations@csrd.bc.ca