



## APPLICATION FORM

### COUNTY OF WELLINGTON 2026 MUNICIPAL ELECTION JOINT COMPLIANCE AUDIT COMMITTEE

#### Personal Information:

Name:	
Address:	
Home Phone Number:	
Business or Mobile Phone Number:	
E-mail Address:	

Please identify your experience as a member of an Election Compliance Audit Committee:

Please identify your experience working on committees, boards, task forces or similar bodies:

#### Skills

Briefly describe your work related activities, experiences or training that relate to the following knowledge and skills (Applicants are encouraged to attach their resumes, or use additional sheets if necessary)

Knowledge and understanding of Municipal Election campaign rules:

Analytical and decision-making skills:
Knowledge of quasi-judicial proceedings:
Oral and written communication skills:

**Education**

Academic Qualifications: (please list all post-secondary diplomas/degrees received)
Professional Licences/Certificates/Qualifications: (please list all professional licences/certifications/qualifications)
Additional Education: (Please provide any other relevant education achievements)

**Employment History**

Present Employer (If retired, most recent employer prior to retirement)	Nature of Business
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Position Held (and years)
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**When are you available to attend meetings:**

During business hours?
In the evening hours?

**Restrictions and Declaration**

<b>Restrictions:</b> 1. The following persons are not permitted to be appointed or to hold a position on the Joint Compliance Audit Committee: <ul style="list-style-type: none"><li>• An employee or officer of any of the Wellington County Municipalities</li><li>• Members of Council of any of the Wellington County Municipalities</li><li>• Council candidates for the 2022 Municipal Elections and any by-election(s) held during the 2022-2026 Council term of office; or</li><li>• Any persons who are Registered Third Parties in Wellington County</li></ul>	
2. Any person appointed as a member of the Joint Compliance Audit Committee must agree, in writing, not to provide any advice to, or prepare or audit the elections financial statements of any candidate for office on any of the Councils of the Wellington County Municipalities.	
<b>Declaration:</b> By submitting this application form, you declare and agree that: <ol style="list-style-type: none"><li>1. The information provided on this form and in any other documents submitted in support of this application is true.</li><li>2. That you are not restricted from being appointed to the Joint Compliance Audit Committee for any of the reasons set out above.</li><li>3. That if appointed as a member of the Joint Compliance Audit Committee you will not to provide any advice to, or prepare or audit the elections financial statements of any candidate for office on any of the Councils in the Wellington County Municipalities.</li></ol>	
Signature:	Date:

**Return to:**  
Township of Puslinch  
Municipal Clerk  
7404 Wellington Road 34  
Puslinch ON N0B 2J0  
T 519-763-1226 E [admin@puslinch.ca](mailto:admin@puslinch.ca)

Personal information on this form is collected by the Township of Puslinch on behalf of the Towns of Erin, Minto, the Townships of Guelph-Eramosa, Wellington North, Mapleton, Centre Wellington and Wellington County (collectively the “participating municipalities”), under authority of the *Municipal Elections Act, 1996*. The personal information collected on this form will be disclosed to each of the participation municipalities, and will be used to assess suitability for appointment to the Joint Compliance Audit Committee. Questions about the collection, use and disclosure of the personal information on this form should be directed to the Justine Brotherston, Clerk, Township of Puslinch, 7404 Wellington Road 34, Puslinch ON, N0B 2J0, 519-763-1226 [jbrotherston@puslinch.ca](mailto:jbrotherston@puslinch.ca).