



Applicant Profile

Advisory Committee Solid Waste Management Plan Review

Name:	Company or Organization
Address:	Title:
Home Phone:	Day Phone:
Home Email:	Office Email:

Please tell us why you would like to be a member of the CRD's Solid Waste Advisory Committee:

Do you represent a group, such as a company, industry, community, neighbourhood association, ratepayers association, School District, First Nation, environmental or conservation organization? Yes No

And if so, which one?

Are you available to attend virtually, by phone, or in person to Committee meetings in the late afternoon/early evening (exact dates yet to be determined), prepared to do readings in advance as required, and report back to the larger group you represent (if applicable)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a device and internet connection to access virtual meetings?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, what is your preferred virtual platform? <input type="checkbox"/> Zoom <input type="checkbox"/> Microsoft Teams <input type="checkbox"/> other _____		
If No, are you able to attend meetings via phone?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Have you participated in other committees? If so, can you briefly list committee and role?

Can you provide a brief example of how you have been able to work toward consensus with people who hold different views?

Please share with us your academic or technical qualifications, work experience, knowledge or expertise relating to waste management, waste reduction or other environmental areas:

What Electoral Area or Municipality do you reside in? _____

Please feel free to supply additional comments. Thank you for your time in completing this form!

Please return to:

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