

DELEGATION APPLICATION

CONTACT INFORMATION: (please print)	
Full Name:	Organization (if applicable):
Street Address:	Phone:
Mailing Address:	Email:
No. of Additional Participants:	
[Name/Contact Information]	
MEETING DATE REQUESTED:	
PURPOSE OF PRESENTATION: (please be spec	ific)
Provide an overview of your presentation bel	ow, or attach a one-page (maximum) outline of your presentation:
Requested Action by Council (if applicable):	
Supporting Materials/PowerPoint Presenta	
	the Monday before the scheduled meeting date.
SIGNATURE(S):	
I/We acknowledge that only the above list communications/comments will be respect	sted matter will be discussed during the delegation and that all the ctful in nature.
Signature:	Date:
OFFICE USE ONLY:	Approved: (Deputy Director of Corporate Services)
Scheduled Meeting Date:	
Date Approved:	
Applicant Advised:	

Personal information you provide on this form is collected pursuant to Section 26 of the *Freedom of Information and Protection of Privacy Act [FOIPPA]* and will only be used for the purpose of processing this application.

Your personal information will not be released except in accordance with the Freedom of Information and Protection of Privacy Act.



DELEGATION APPLICATION

APPLICATION PROCEDURES:

'Delegation Application' form must be filled out and include:

- Purpose of the presentation.
- Proposed meeting date.
- Proposed action of Council (must be within the authority of the City).
- Contact details of the person who will speak on behalf of the delegation.

If you are approved as a delegation, you will be scheduled for the first available Committee of the Whole meeting date [unless otherwise specified on your application]. Up to three (3) delegations are permitted per meeting. Staff will confirm the date and time of the meeting you are scheduled to attend. Delegations must be present at the beginning of the meeting as it is not possible to predict the exact time the delegation will be heard.

Committee of the Whole (COW) meetings generally take place at 6:00 p.m. on the third Monday of each month. Committee of the Whole Meeting Schedule.

A copy of your presentation, supporting materials, and PowerPoint presentation (if applicable) **must be submitted by 5:00 pm on the Monday before the scheduled meeting date**. As per <u>Council's Procedure bylaw</u>, delegations are provided up to **10 minutes** to address Council, so please present your information clearly and concisely. Document submissions may be provided as follows:

MAIL/IN PERSON: City of Port Alberni, 4850 Argyle Street, Port Alberni, BC V9Y 1V8

FAX: 250-723-1003

EMAIL: <u>corp serv@portalberni.ca</u>

Committee of the Whole meetings are held in Council Chambers and are live-streamed. When the Mayor calls you, please come forward to the podium and introduce yourself by speaking into the microphone in a clear voice.

Note: Council often does not make final decisions for requests at the meeting. Typically, requests are referred to staff or another Committee for review, report, and recommendations to Council at a future meeting date.

Thank you for taking time to prepare for your delegation with Council. Your participation in our