



Cypress County

APPOINTMENT TO COUNTY BOARDS/COMMITTEES

APPLICATION FORM

SUBDIVISION & DEVELOPMENT APPEAL BOARD

Applicant Name: _____

Mailing Address: _____
_____ **Postal Code:** _____

Contact Number: _____ **Email:** _____

Legal Address: _____

Occupation: _____ **Employer:** _____

Applicable Education/Business/Work /Experience:

Applicable Community Involvement and/or Other Volunteer Activities:

Feel free to attach your resumé or any other information indicating why you feel you would be a strong Board member.

Signature of Applicant

Date

Return this form together with any attachments by 4:30 p.m., Wednesday, April 15, 2026 to:

legislativeservices@cypress.ab.ca or

*Cypress County
816 2nd Avenue
Dunmore AB T1B 0K3
Attn: Trudy Enns*