



APPLICATION FOR MARRIAGE COMMISSIONER PROGRAM

Community of: SIDNEY	Return this completed form no later than the closing date of: MAY 20, 2018
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Instructions: Complete this form in your own handwriting. If you require additional space, complete your answers on a separate sheet of paper. Do not attach a résumé, as your answers will be vetted against a set of standards.

Last Name	First Name
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Street Address

Mailing Address (if different)

Telephone Number (with Area Code)	Email Address
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1. Do you have voice mail or an answering machine? <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Do you own a computer? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, indicate your skill level: <input type="checkbox"/> Advanced <input type="checkbox"/> Intermediate <input type="checkbox"/> Novice
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3. Do you have internet access in your home? <input type="checkbox"/> Yes <input type="checkbox"/> No	4. How far is your home from the centre of your community? <input type="checkbox"/> Less than 5 km <input type="checkbox"/> 5 - 10 km <input type="checkbox"/> Over 10 km	5. How many years have you resided in the posted community? _____
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6. What is your current work status? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Retired <input type="checkbox"/> Retiring _____ <small style="margin-left: 100px;">Date</small>	If you work full-time or part-time, please provide your work schedule on the lines below.
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7. What are your current or previous occupations and/or business activities?

- What memberships do you have and/or volunteer work do you perform?

- What aspects of your background do you think will assist you to perform this public service?

8. What interests you in the public service role of performing civil marriage ceremonies?

9. Are you prepared to perform marriage ceremonies, without reservation, for all couples as authorized by the Human Rights Code of British Columbia (e.g. race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, or sexual orientation)?

Yes No

10. Declare any affiliations, business or personal, that may be perceived as a conflict of interest, including those by immediate family members (e.g. bed & breakfast, flower shop, photography, restaurant or catering business).

11. When do you generally take vacation and what is the normal length of your annual vacation?

• If you take vacation between June and September, indicate the length of time.

Less than 1 week 1 week 2 weeks or more Other _____

12. Do you speak any languages other than fluent English? Yes No If yes, list the other language(s) below:

13. What mode of transportation would you use to get to and from a civil ceremony?

• Explain the reason for your choice of transportation if using a mode other than your personal vehicle.

REFERENCES

1

Name _____

Address _____

Phone number _____
(include area code)

2

Name _____

Address _____

Phone number _____
(include area code)

APPLICANT SIGNATURE

Signature

Date