



**SHERBROOKE LAKE STEWARDSHIP  
COMMITTEE  
APPLICATION FORM**



**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone:** (    ) \_\_\_\_\_ **Email:** \_\_\_\_\_

**1. Why are you interested in serving on the Sherbrooke Lake Stewardship Committee?**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Describe your experience in sitting on boards/committees.**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Are you willing to be trained to take water samples?**

Yes  No

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<b>4. Are there times of the year that you would not be available for meetings, participate in training or to collect water samples?</b>

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<b>5. Would you prefer day or night meetings?</b>
Day <input type="checkbox"/> Night <input type="checkbox"/>

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<b>6. What would be the top three outcomes you would like this Committee to achieve?</b>

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**ONLY ANSWER QUESTION #7 IF YOU ARE APPLYING AS MEMBER WITH PROFESSIONAL KNOWLEDGE OF THE TECHNIQUES OF WATER QUALITY MONITORING.**

<b>7. Describe your technical skills and expertise pertaining to water quality monitoring programs. Please include credentials.</b>

<b>Any additional information you would like to include?</b>

<b>In which Municipality do you reside or own property?</b>
MODL <input type="checkbox"/> MODC <input type="checkbox"/> Other <input type="checkbox"/>

<b>Please provide the civic address to the above property</b>

**By applying to serve on the Sherbrooke Lake Stewardship Committee, you agree to help develop a water quality monitoring program to establish a baseline to aid in the evidence based decisions concerning the development of the properties acquired by MODL for public use, and agree to the Terms of Reference for this Committee.**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Print Name:*

***Thank You***

**Return Applications to:**

*Chad Haughn, Director of Recreation & Parks  
Municipality of Chester  
151 King St PO Box 369  
Chester NS B0J 1J0  
[recreation@chester.ca](mailto:recreation@chester.ca)  
902-275-3490*