

## **RURAL BOARD OF EXAMINERS**

Province of Saskatchewan

PO Box 488, Rosetown, SK S0L 2V0 Phone: (306) 882-2314 • Fax: (306) 882-3287 Email: rural.board.exam@sasktel.net



## APPLICATION FOR A RURAL CLASS "C" CERTIFICATE OF QUALIFICATION

Name of Applicant	:		
Address:			
Presently Employe	ed at:		
(Name of Municipality)			
Phone No.:	(Work)	(Re	es.) Fax No.:
E-Mail Address: _			
Particulars of Edu (Certificates, Diplo	ucation: mas, Degrees, Other; please	indicate date obtained)	
1			
2			
3			
Particulars of Mul (Give position held Municipality Positi	nicipal Employment Experi	ence: cement and termination of ent Date of Termination	of office)  Accumulated Hours  Part-Time Full-Time Total
1			
2			
3			
Grand Tota	al Hours	_ the name of the adminis	trator(s) you trained under and
(Give position held	ployment Experience: I and exact dates of commen		
Employer		<u>mmencement</u>	Date of Termination
2			
3			
Please attach extra sheets if necessary.			
Date:	Sig	nature:	

## Please include:

- (1) The required fee of \$350.00 payable to Rural Municipal Administrators' Association
- (2) Documentation to verify education.
- (3) Documentation to verify training;
- (4) If applicable, please include a certified true copy of the resolution of council hiring you as a trainee to: Secretary, Rural Board of Examiners, at above address.