



# RURAL BOARD OF EXAMINERS

Province of Saskatchewan



P.O. Box 130  
Wilcox, Saskatchewan  
S0G 5E0

Phone: (306) 732-2030  
Fax: (306) 732-4495  
Email: rural.board.exam@sasktel.net

Application Date \_\_\_\_\_

## APPLICATION FOR PERMIT RE: ACTING ADMINISTRATOR (Section 110 (5) - *The Municipalities Act*)

- Name of Municipality making application for permit:  
Rural Municipality of \_\_\_\_\_ No. \_\_\_\_\_
- Please provide details of the steps taken to fill this position with a fully qualified individual:

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- If the vacancy was not advertised, please indicate why no advertising was undertaken:

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- For what period of time is the permit being requested:

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- Give full details of the individual you will employ under the permit if issued:  
Name \_\_\_\_\_

Educational Qualifications: \_\_\_\_\_  
\_\_\_\_\_

Related Work Experience:  
\_\_\_\_\_  
\_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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6. If the person noted under item #6 does not possess a certificate in Local Government Authority, are they prepared to enroll in the course? \_\_\_\_\_
7. Name of previous administrator: \_\_\_\_\_
8. Reason for leaving: \_\_\_\_\_
9. Please list the names and other relevant details of all applications for this position who were not accepted by council:

Name of Applicant	Mun. Cert. Held	Mun. Work Experience	Reason for Non-Acceptance	Applicant Interviewed?

This application, submitted on behalf of the council of the R. M. of \_\_\_\_\_  
 No. \_\_\_\_\_, was approved by resolution of council passed on the \_\_\_\_\_ day of  
 \_\_\_\_\_, 20\_\_\_\_\_

**Note:** A certified copy of the resolution of council is \_\_\_\_\_  
 required.