



RURAL BOARD OF EXAMINERS

Province of Saskatchewan

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



Application Date: _____

1. Name of Municipality making application for permit:

Rural Municipality of _____ No. _____

Mailing Address: _____

Email: _____

2. Please provide details of the steps taken to fill this position with a fully qualified individual:

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

4. For what period of time is the permit being requested:

5. Give full details of the individual you will employ under the permit if issued:

Name: _____

Educational Qualifications: _____

Related Work Experience: _____

Other information: _____

6. If the person noted in #5 does not possess a certificate in Local Government Authority, are they prepared to enroll in the course? yes no

7. Name of previous Administrator: _____

8. Reason for leaving: _____

Please complete both pages of this application form.

Forward to: Secretary of the Rural Board of Examiners
rural.board.exam@sasktel.net
(if mailing application please e-mail for current mailing address)

