

## Hamilton Police Services Board Delegation Request Form

(Request to appear before the Police Services Board)

Please note your personal information will be redacted/removed prior to this form being placed on the Board's website and agenda for public viewing.

| Your Name:   |                         |                     |                            |          |
|--|-------------------------|---------------------|----------------------------|----------|
| E-mail Address:  |                         |                     |                            |          |
| Home Phone:  |                         |                     |                            |          |
| Mailing Address:   |                         |                     |                            |          |
| (If applicable) Firm/Organization:   |                         |                     |                            |          |
| Work Phone:  |                         |                     |                            |          |
| Work Address:  |                         |                     |                            |          |
| Details of delegation, inc   | luding a <b>summary</b> | and the <b>obje</b> | ective(s) of your delegati | ion:     |
| Will you be providing a p  | resentation?            | Yes                 | No                         |          |
| Have discussions or cor<br>Services Board or the Ad  |                         |                     |                            | n Police |
| Please submit the comple   | eted form by mail       | or e-mail to:       |                            |          |
| Kirsten Stevenson, Admi<br>Hamilton Police Services<br>155 King William Street<br>Hamilton, ON L8R 1A7 |                         |                     |                            |          |
| kirsten.stevenson@ham  | lton.ca                 |                     |                            |          |