

THE CORPORATION OF THE
CITY OF WHITE ROCK
15322 BUENA VISTA AVENUE, WHITE ROCK, B.C. V4B 1Y6



POLICY TITLE: **COMMITTEE MEMBER FEEDBACK
OPPORTUNITY**

POLICY NUMBER: **COUNCIL - 123**

<i>Date of Council Adoption:</i> December 6, 2010	<i>Date of Last Amendment:</i> June 15, 2015
<i>Council Resolution Number:</i> 2010-536, 2013-082, 2015-214	
<i>Originating Department:</i> Administration	<i>Date last reviewed by the Governance and Legislation Committee:</i> March 11, 2013

Policy:

Schedule "A" form titled "Committee Member Feedback", attached to and forming part of policy Council – 123 will be forwarded annually to all voting committee members, who have been appointed by Council, during the first week of October. Committee members will be requested to submit their forms by November 7th.

Schedule "A" forms are to be returned to the City Clerk's office for the information to be combined onto a spread sheet including the percentage of those who responded.

The information will be forwarded to Council by the end of the year.

Rationale:

A mechanism to receive feedback from the committee members as to how well they perceived the committee, including its format, to have functioned.

SCHEDULE “A” COMMITTEE MEMBER FEEDBACK

I currently serve on the _____ Committee.

- 1) Please summarize your experience in serving on this committee: ☐ good / rewarding
☐ neutral
☐ dissatisfied

Additional comments: _____

- 2) The number of times the committee met: ☐ good
☐ could have met more
☐ excessive

Additional comments: _____

- 3) The meetings ran: ☐ efficiently
☐ slowly
☐ confusing

Additional comments: _____

- 4) Did you understand the committee mandate? ☐ Yes ☐ No

Additional comments: _____

- 5) Was staff helpful when needed. Do you feel they supplied sufficient guidance? ☐ Yes ☐ No

Additional comments: _____

- 6) Is there any type of training or presentation(s), by either City staff or from a member of an outside organization(s), that you would have found beneficial to have to help you with your committee work?

Comments: _____

Please see over

SCHEDULE “A”
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7) Do you have any recommendations that could improve your experience of serving on a City committee?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Name: _____ (Optional) Dated: _____

Thank you for taking the time to fill in this form. Your feedback is very much appreciated and will be considered by Council in making future decisions regarding the City's committees.

Form Due to the City Clerk's Office by NOVEMBER 7th