

Chief Administrative Office

City Clerk

Delegation Request

For Office Use Only: Meeting Name: Meeting Date:

| | | Deleya | uon nequ | มธิวเ [| 5 | | | |
|--|---|---|---|-------------------------------|--|---|-------|--|
| Please complete this form for your request to delegate to Council or Committee on a matter where a decision of the Council may be required. Delegations at Council meetings are generally limited to agenda business published with the meeting agenda. Delegations at Committee meetings can relate to new business within the jurisdiction and authority of the City and/or Committee or agenda business published with the meeting agenda. All delegations are limited to five (5) minutes. | | | | | | | | |
| Attention: City Clerk's Office, City of Brampton, 2 Wellington Street West, Brampton ON L6Y 4R2 | | | | | | | | |
| Email: | Email: <u>cityclerksoffice@brampton.ca</u> Telephone: (905) 874-2100 Fax: (905) 874-2119 | | | | | | | |
| Meeting: | Leeting: City Council Image: Committee of Council Image: Committee of Council Image: Committee of Council | | | | Planning and Development Committee Other Committee: | | | |
| Meeting Date Requested | | November 3, 2021 | Agenda Item (i | f applicable) | : 12.3 - S | ummary of Recommer | ndati | |
| Name of Individual(s): | | Ebenezer Rajeevan; Jennifer Ward | | | | | | |
| Position/Title: | | Area Manager for Peel; Community Facilities Specialist | | | | | | |
| Organization/Person being represented: | | Christian Horizons | | | | | | |
| Full Address for Contact | | : | | Telephone: | | | | |
| | | | | Email: | erajeevan@christian-ho | orizons.org; jward@christian-horizons.org | | |
| Subject Matter Supportive Housing Policy Review to be Discussed: Supportive Housing Policy Review | | | | | | | | |
| Action Requested: | | | | | | | | |
| A formal presenta | ation will a | accompany my delegation: | 🗌 Yes | 🖌 No | | | | |
| Presentation form | nat: |] PowerPoint File (.ppt)] Picture File (.jpg) | Adobe File | or equivalent (.avi, .mpg) | (.pdf) | Other: | | |
| Additional printed information/materials will be distributed with my delegation: 🗌 Yes 🛛 🔽 No 🔲 Attached | | | | | | | | |
| Note: Delegates are requested to provide to the City Clerk's Office well in advance of the meeting date: (i) 25 copies of all background material and/or presentations for publication with the meeting agenda and /or distribution at the meeting, and (ii) the electronic file of the presentation to ensure compatibility with corporate equipment. Submit by Email | | | | | | | | |
| Once this completed form is received by the City Clerk's Office, you will be contacted to confirm your placement on the appropriate meeting agenda. | | | | | | | | |
| used in the preparation City's website. Questi | on of the app ions about th | is collected under authority of the Mu blicable council/committee agenda ar he collection of personal information n, Ontario, L6Y 4R2, tel. 905-874-21 | nd will be attached to should be directed to | the agenda and | publicly avai | lable at the meeting and om | the | |