

Expression of Interest – Nomination Form

CUMBERLAND CITY COUNCIL ADVISORY COMMITTEE

I, the undersigned, would like to express my interest in being selected as a Member of one of Cumberland City Council's Advisory Committees:

Personal Details:
Salutation: First Name: Last Name:
Residential Address:
Organisation (if applicable):
Phone: Mobile phone
Email address:
Are there any specific requirements that Council would need to meet to enable you to participate on your preferred Advisory Committee (if you are selected)?
□ No
☐ Yes. If yes, please provide details (e.g. transport assistance, hearing loop, accessible venue, and accessible communication):

Reason for nominating:

1. Which of Cumberland City's Committees are you submitting an Expression of Interest



2. Please list any memberships of community, local council, interagency or other	
government organisations / boards / committees (past or present) that you hold or have	е
held:	
neid.	
3. What are your reason/s for nominating for this Committee?	
5. What are your reason's for nominating for this committee:	
Selection criteria:	
To be eligible as a community representative, members address the selection criteria. Please refer to	,
Section 3 of the Committee's Terms of Reference.	•
4. Please confirm how your skills, interest, experience and / or expertise make you a stroi	ng
eligible candidate for appointment on this committee, in accordance with the	
requirements outlined in the Terms of Reference.	
5. Are you a local resident of the Cumberland Local Government Area, or work, or study	
within the Cumberland Local Government Area?	
□ Yes	
□ No	



Declaration:

I am aware that if I am selected to be on Cumberland City Council's Committee, that:

	nominate for one of Cumberland City Council's Advisory Committees, please com	nlata this form an		
Signa	nature: Date:			
	electronic meetings is at the discretion of each Committee.			
	\Box I will be able to attend meetings in person as required, and understand that the	e holding of		
	□ I will be required to adhere to Council's Code of Conduct moving forward once appointed.			
	$\ \square$ I will be required to attend compulsory induction training for all committee men	nbers.		
	member.			
	I am able and available to commit to attending all Committee meetings and to be an active			

To nominate for one of Cumberland City Council's Advisory Committees, please complete this form and return to Council.

Send forms to: Cumberland City Council

PO Box 42

MERRYLANDS NSW 2160

Or email: council@cumberland.nsw.gov.au

With the subject line 'Council Advisory Committee Nomination'

PLEASE NOTE:

Nominations for Cumberland City Council's Committee membership will be assessed against the nominee's ability to meet the criteria above. The membership term for Community Representatives is a maximum of two (2) years and meetings are held quarterly or as required. Please note that not all nominations for membership of Cumberland City Council's Advisory Committees will be successful.