

Reconciliation Action Plan Community Reference Group (RAPCRG)

Nomination Form

The City is seeking expressions of interest for membership of the Reconciliation Action Plan Community Reference Group (RAPCRG). The purpose of the RAPCRG is to:

- Explore options for the Joondalup community to advance reconciliation;
- Assist with the development of the City's Reconciliation Action Plan;
- Scope and reflect on how the City of Joondalup can contribute to reconciliation in a way that is meaningful, mutually beneficial and sustainable;
- Improve relationships with Aboriginal and Torres Strait Islander peoples and relevant stakeholders;
- Foster an understanding of Aboriginal and Torres Strait Islander cultures, rights and experiences;
- Enable opportunities that are culturally appropriate, partnership-centred and encourage Aboriginal and Torres Strait Islander people to participate fully.

To nominate, please complete the nomination form below.

Note: Prospective nominees must ensure they have read and agree to the Terms of Reference before applying. The Terms of Reference is provided with this nomination form.

For further information, please contact the Administration Officer Community Development on **9400 4200** or via email at info@joondalup.wa.gov.au

Your Details:				
Note: This information will be treated as confidential and will not be published in any document or report on the outcomes of the consultation.				
Name:				
Address:				
Suburb:				
Phone:				
Mobile:				
Email:				
Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other	
I am aged:	<input type="checkbox"/> under 18	<input type="checkbox"/> 18 – 24	<input type="checkbox"/> 25 – 34	<input type="checkbox"/> 35 – 44
	<input type="checkbox"/> 45 – 54	<input type="checkbox"/> 55 – 64	<input type="checkbox"/> 65 – 74	<input type="checkbox"/> 75+

I identify as a person who is Aboriginal or Torres Strait Islander

I am nominating as:

A community representative

An organisational representative*

* If nominating as an organisational representative, please confirm the organisation, group or business you will be representing: _____

I confirm I have approval from this organisation to be its representative on the RAPCRG.

I have read, understood and agree to the Terms of Reference associated with the Reconciliation Action Plan Community Reference Group.

Addressing the Selection Criteria

Please complete the selection criteria below to outline your interest and suitability to become a member of the Reconciliation Action Plan Community Reference Group.

Why are you interested in the development of the City of Joondalup Reconciliation Action Plan?

Please advise of any relevant connection, experience, knowledge or skills to support your nomination onto the City of Joondalup Reconciliation Action Plan Community Reference Group?

Why do you believe you are suitable for a position on the Reconciliation Action Plan Community Reference Group?

Please submit your nomination form by the closing date of **Thursday 21 November 2019, 5.00pm**

Thank you for nominating for the Reconciliation Action Plan Community Reference Group.