

Advisory Committee Application Form



Note: Your application can be better assessed if you provide as much relevant information as possible.

Please complete form and send to:

customer@rockingham.wa.gov.au or
CEO, City of Rockingham
PO BOX 2142, Rockingham DC WA 6967

All forms must be received on or before Friday 19 March 2021

Applicants Name:

If you are representing a
Association/Organisation etc (if applicable)

Name of Association/Organisation etc:

Position Title in Association/Organisation etc:

Telephone Number:

Email Address:

Address:

Name of Advisory Committee:

Cultural Development and the Arts Advisory Committee

Do you want to be a representative on the Cultural Development and the Arts Advisory Committee? If you think you have what it takes to make a positive contribution, apply here.

Terms of reference for the **Cultural Development and the Arts Advisory Committee –**

There are **Two (2) Community Member vacancies**

Terms of Reference: To provide advice and guidance on cultural development and the arts, whilst representing the community's needs and aspirations in line with the City's Cultural Development and the Arts Strategy.

For more information contact Donna Cochrane on 9528 0333 or via customer@rockingham.wa.gov.au

Please address the following with relevance to the Advisory Committee and the Terms of Reference for the Committee you are applying for. Personal attributes (*e.g. cultural background, lived experience*), skills, experience and qualifications (*e.g. previous or current employment, educational experience*) refer to page 3 and 4 for the terms of reference.

Personal Attributes

Example only – I am a senior citizen

Skills, Experience, Qualifications

Example only – I have a certificate in aged care

If you need to provide more information, please attach to your application separately.

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Provide a few short lines about why do you want to be on this chosen committee and what attracts you to be a member of this chosen committee?

List the community groups you have been involved in especially those relevant to the Advisory Committee you are applying for? Also provide details of your involvement and experience.

<u>Group</u>	<u>Role</u>	<u>Achievements</u>
<i>Example only – Cultural and Development Arts Group</i>	<i>Example only – President</i>	<i>Example only – Annual Art Festival</i>

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List any City of Rockingham Advisory Committees you have been or are currently involved in. Provide your role and any achievements and relevant experiences.

<u>Group</u>	<u>Role</u>	<u>Achievements</u>
<i>Example only – City Safe Advisory Committee</i>	<i>Example only – Community Member</i>	<i>Example only – Strategy Adopted</i>

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City of Rockingham Administration Use Only - Executive Support for Advisory Committee

Date Form Received:		Date advised applicant of appointment or unsuccessful:	
HPECM Number:		HPECM Number:	
Completed above signed by:		Completed above signed by:	