## **EXPRESSION OF INTEREST**



Advisory Committee Name:	Community Safety Advisory Committee
Position applying for:	Business Associations Representative
	Youth Community Member
PERSONAL INFORMATION:	
Full name:	
Contact number:	
Email:	
Residential address:	
Current employment:	
Relevant Qualifications:	
Are you a resident of Palmerston:	$\Box$ Yes $\Box$ No (It is required to be a Palmerston Resident)

## PLEASE PROVIDE INFORMATION TO SUPPORT YOU EXPRESSION OF INTEREST

ie: Any relevant experience, how you plan to contribute to the advisory committees' objective, topics/areas of special interest relating to community well-being, safety and social and animal wellbeing issues and any additional community groups you are a part of.



Please attach any additional supporting evidence for your Expression of Interest.

## DECLARATION

I have read and understand the Committee/'s Terms of Reference.

I declare that the information contained in this application and attachment's is true and correct.

Signature: \_\_\_\_\_

Date:

Please forward this form and supporting documents to: Email: <u>Palmerston@palmerston.nt.gov.au</u> For any enquiries please call (08) 8935 9922