

# RADF Committee Nomination Form

## Form Preview

### RADF Committee Nomination

#### Nominee Details

**Title**

- Mr
- Ms
- Other:

**Full Name**

First and Last

**Street Address****Postal Address**

If different to Street Address

**Phone Number**

Must be an Australian phone number.

**Email**

Must be an email address.

**Website**

Must be a URL.

**Do you identify as:**

- Male
- Female
- Other:

**Do you identify with one or more of these groups:**

- |   |  |
|---|--|
| <input type="checkbox"/> Aboriginal Person                        | <input type="checkbox"/> Person with a Disability                    |
| <input type="checkbox"/> Torres Strait Islander Person            | <input type="checkbox"/> Local Government Employee or Representative |
| <input type="checkbox"/> Australian South Sea Islander Person     | <input type="checkbox"/> Young Person (under 30 years)               |
| <input type="checkbox"/> Culturally and/or Linguistically Diverse | <input type="checkbox"/> Rural Resident Outside of Mackay CBD        |

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Older Person (55 years +)

**Have you ever been a RADF Committee Member?**

- Yes  
 No

**If yes, please detail where and when you were a Committee Member**

**Please indicate which artforms you identify with (please tick all relevant boxes)**

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Visual arts | <input type="checkbox"/> Music                          |
| <input type="checkbox"/> Theatre     | <input type="checkbox"/> Design                         |
| <input type="checkbox"/> Dance       | <input type="checkbox"/> Multimedia                     |
| <input type="checkbox"/> Festivals   | <input type="checkbox"/> Museums and Cultural Heritage  |
| <input type="checkbox"/> Craft       | <input type="checkbox"/> Community Cultural Development |
| <input type="checkbox"/> Writing     | <input type="checkbox"/> Other: <input type="text"/>    |

**Why would you like to join the RADF Assessment Committee?**

300 words max

**Please list any organisations and/or collectives of which you are a member and your membership status**

Example: Crossroad Arts Mackay, General Committee Member

**Please attach a copy of your current CV or Resume**

Attach a file:

**Please attach any letters of support from organisations/collectives of which you are a member (as above)**

Attach a file:

## Certification

### Information Privacy

The information you provide in this nomination form ('the information') will be used by the Council to process and assess your nomination (including verification of the information) and, if successful, in connection with your membership of the Committee. The Council may disclose the information to Arts Queensland. The information may be used by the

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Council or Arts Queensland for reporting purposes, training, systems testing and process improvement. The information may be anonymised and used for statistical purposes. The names of the members of the RADF Committees may be published on the Council website and/or on the Arts Queensland website. The Council and Arts Queensland treat all personal information in accordance with the *Information Privacy Act 2009*. The provisions of the *Right to Information Act 2009* apply to documents in the possession of the Council or Arts Queensland.

### I certify that:

- I have read and understand the roles and responsibilities of the RADF Committee member.
- The statements in this nomination form, are true and correct to the best of my knowledge, information and supporting material are my own work.
- I give permission for Council to verify statements outlined in this form.

- I Agree  
 I Disagree

### Name in full

### Date