



SINGLETON SPORTS COUNCIL COMMITTEE NOMINATION FORM

1. Personal Details

Group/Organisation					
Name					
Postal Address					
Suburb		State		Post code	
Contact Number		Email			

2. Nomination Details

Summarise briefly why you would like to be a member of this Committee:

Please list any professional experience, academic qualifications, local knowledge and sporting group or group involvement that may be relevant to this Committee:

Have you been a member of a previous Council Committee? If so, please list the name of the Committee/s and period of service.

Have you put forward a nomination for any other new/existing Committee?

No Yes, Name: _____

List any additional information to support your nomination:

Meetings are generally held after business hours. Please indicate any days or times you are unavailable to attend meetings:

3. Additional Information

In order for Singleton Council to ensure the success of its Committees, it is important that members have a complementary mix of knowledge, skills, interests and experiences as well as an understanding of the local community’s needs and aspirations. It is also important for members to have an understanding of and value working in a collaborative, supportive environment to achieve Committee objectives. All relevant information will be considered by Council when nominations are reviewed for Council Committee membership.

Nomination forms are to be returned by close of business on **[insert closing date]**.

Addressed to: Mark Ihlein, Singleton Council, PO Box 314 SINGLETON NSW 2330 or **Email:** council@singleton.nsw.gov.au

4. Consent and use of personal information

Thank you for nominating for a Council Committee. Please read the following and sign if consent is given:

1. I consent to the personal information provided on my nomination form being used for the purpose of recruitment to and management of Council Committees (see note below).
2. I am aware that membership to this Committee requires my regular attendance at meetings to be held and that an absence from three (3) consecutive meetings, without having submitted an apology to the Chair, may result in my dismissal from the Committee.
3. I have read and agree to abide by Singleton Council’s Committees Procedure, the Committee Terms of Reference and Code of Conduct.
4. I confirm that the information given in this form is to the best of my knowledge, true and complete. I understand that any false information or deliberate omission of relevant information may lead to non-selection or termination of appointment.

Name of Nominee	Signature	Date

PRIVACY NOTIFICATION

Personal and private information supplied to Council is managed in compliance with the *Privacy and Personal Information Protection Act 1998*, *Government Information Public Access Act 2009* and Council’s Privacy Management Plan. The supply of information on this form is voluntary but it is required to process your application/request. The [Privacy Management Plan](#) may be accessed on Council’s website. If you have any further enquiries concerning Privacy matters, contact Council’s Privacy Officer on 02 6578 7290.

