

Noongar Charitable Trust Advisory Council

Membership Nomination Form

1. Contact details

Name: _____

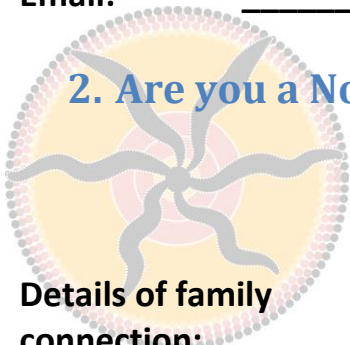
Gender: Male Female

Address: _____

Phone: _____

Email: _____

2. Are you a Noongar person?



Yes No

Noongar Charitable Trust
Supporting our Noongar Claimant Groups

Details of family connection: _____

3. Current interests/commitments:

Occupation: _____

Employer: _____

Other business interests

4. Qualifications and experience

Education

Previous Experience

5. Further reasons for consideration

For example:

- capacity to contribute strategically to distribution of Trust funds;
- ability to represent the community and identify local priorities;
- capacity to develop ideas for programs to benefit the community.

Have you a National Police Clearance?

Yes

No

Please note a National Police Clearance will be required to substantiate eligibility.

Have you been bankrupt in the past seven years?

Yes

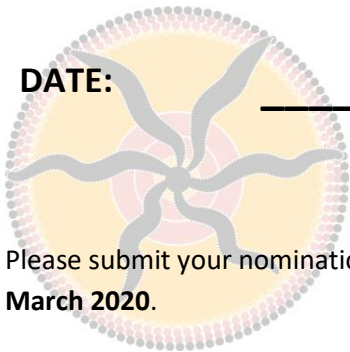
No

Declaration and Consent

- I **DECLARE** that all the information provided with this nomination is true and correct. I acknowledge that any decision made in relation to this nomination is at the discretion of the Trustee of the Noongar Charitable Trust, being Equity Trustees Wealth Services Limited.
- I **CONSENT** to my personal information being provided to Equity Trustees Wealth Services Limited to hold on file. The Equity Trustees Wealth Services Limited Privacy Statement can be viewed at:
<http://www.eqt.com.au/corporate-governance/privacy-statement.aspx>
- If I am unsuccessful in my nomination, I **CONSENT** to my information being held on file to fulfil any positions that may become vacant during the term

SIGNATURE: _____

DATE: _____



Noongar Charitable Trust

Supporting our Noongar Claimant Groups

Please submit your nomination to Equity Trustees at communitytrusts@eqt.com.au by **Tuesday 31st March 2020**.