

Nomination Form Community Safety Working Group City of Wanneroo

Closing Date: N/A

Return to: Council Support, City of Wanneroo, Locked Bag 1, Wanneroo, WA 6946 Or Email to: <u>CommunitySafety@wanneroo.wa.gov.au</u>

Nominee Name	
Last Name	
Given Names	
Home address	
(Include Post Code)	
Email Address	
Mobile	
Home	
Work	
Occupation & Qualifications	

I hereby submit my nomination for:		
and declare that all information I have provided is true and correct. I also certify that my nomination is made in accordance with City's policy on representation (where applicable). Should my nomination be successful, I will make every endeavour to commit the time and effort necessary to undertake this position and will adhere to the eligibility criteria.		
Signature:	Date:	

Selection Criteria - Please ensure you address each of the following selection criteria below. Are you a current resident of the City of Wanneroo? Identify your experience and interest in community safety and how you will represent the views of the community? How do you feel that can contribute to the City of Wanneroo Community Safety Working Group?

PLEASE NOTE: Your nomination and supporting documentation is photocopied for administrative purposes. It is important that profile information be complete and up to date. All personal information will be used only for consideration of this position and will be kept confidential from public records.

Please contact the City's Community Safety Officer on (08) 9405 5267 if you have any questions in relation to the activities of the Community Safety Working Group.