

Central Highlands Arts and Cultural Advisory Committee

Expression of Interest Form

To register your interest in becoming a member of the Central Highlands Arts and Cultural Advisory Committee (CHACAC), please complete and submit this form with the required support materials to CHRC Arts and Cultural Officer.

Nominee Details

The following details will be utilised for record keeping purposes and nominee locality.

Title: Mrs Ms Mr Other

First name: _____

Surname: _____

Street address: _____

Suburb/Town: _____

State: _____

Postcode: _____

Postal address: _____

Suburb/Town: _____

State: _____

Postcode: _____

Work Phone: () _____

Home () _____

Mobile _____

Fax: _____

Email: _____

Website address: _____

Have you previously been a CHACAC and/or Regional Arts Development Fund (RADF) Committee member?

YES - Please state which Committee you were a member of _____

NO

Please select day/s and add times to indicate your preferences.

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Selection criteria

The following information will be used to assess the expression of interest.

Why would you like to join the CHACAC?

Are you a current art, cultural or heritage practitioner? If so, tell us more!

What new initiative/s would you like to see for arts, culture and/or heritage in the Central Highlands?

Please indicate the artforms you have interest/experience in (please tick all relevant boxes)

- | | | |
|------------------------------------|---|--|
| <input type="checkbox"/> Theatre | <input type="checkbox"/> Writing | <input type="checkbox"/> Multi-arts |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Music | <input type="checkbox"/> Museums and Galleries |
| <input type="checkbox"/> Festivals | <input type="checkbox"/> Cultural Tourism | <input type="checkbox"/> Visual Arts |
| <input type="checkbox"/> Heritage | <input type="checkbox"/> Craft and Design | <input type="checkbox"/> Community Arts & Cultural Development |

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

Name of Organisation and/or Collective	Your Membership Status

Certification

Information Privacy

The information you provide in this nomination form ('the Information') will be used by the Council to process and assess your expression of interest (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 Council or Arts Queensland for reporting purposes, training, systems testing and process improvement. The information will be anonymised and used for statistical purposes.

The names of the members of the CHACAC may be published on the [Council website](#) and/or [Arts Queensland RADF 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, the undersigned, certify that:

- I have read and understand the roles and responsibilities of a CHACAC 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 on this form.

Signature: _____

Date: / /

Name in full: _____