

Economic Development AdvisoryGroup

Nomination Form

To register your interest in becoming a member of the Economic Development Advisory Group, please complete and submit this Nomination Form to Council's Economic Development section by Friday, 14 June 2024.

Nominee Details Title: Mr	ls ☐ Other (please sp	pecify):		
First name:				
Surname:				
Street address:				
Suburb/Town:		State:	Postc	ode:
Postal address: If different	t from your street address			
Suburb/Town:		State:	Postco	de:
Work Phone: ()	Home	()	Mobile:	
Fax:	Email:			
Website address:				
Please list your business/ind	dustry skills and experier	nce?		
Please indicate the sector y	ou have expertise/intere	st in (please t	ick all relevant	boxes).
☐ Accommodation/Tourism	□ Agriculture/F	orest/Fishing		☐ Construction/Trade
☐ Education/Training	☐ Financial/Ins	urance/Legal	Services	☐ Health Services
□ Food/Beverage	□ Manufacturir	ıg		□ Retail

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Please list any organisations and/or collectives of which you are a member and your membership status (e.g. Industry Groups, Chambers of Commerce etc).

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 nomination (including verification of the Information) and, if successful, in connection with your membership of the Economic Development Advisory Group.

The information may be used by the Council for reporting purposes, training, systems testing and process improvement. The information may be anonymized and used for statistical purposes.

The names of the members of the Economic Development Advisory Group may be published on the Council website

The Council treats 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.

I, the undersigned, certify that:

- I have read and understand the charter, roles and responsibilities of an Economic Development Advisory Group 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:		
Please return completed form to:		
Economic Development Coordinator Burdekin Shire Council		
PO Box 974		
Ayr Q 4807		
or email burdekinsc@burdekin.qld.gov.au		