Electrical Safety Board nomination form

This form must be completed to nominate for a position on the Northern Territory Electrical Safety Board.

1. Which position	1. Which position you are nominating for? (Select one only)				
☐ Representative	e of employers of electrical workers				
☐ Representative	e of electrical workers				
☐ Representative	e of the community				
☐ Representative	e of the Territory				
	e of electrical training bodies				
☐ Chair of the D	isciplinary Committee (Please ensure section 7 is completed)				
2. Nominee Details					
Given name(s):					
Family name:					
Phone number:	Email:				
Residential address:					
3. Source of nomination					
☐ Self-nominatio	on (continue to section 4)				
Details of nominating	organisation				
Organisation name:					
Nominator name:	Email:				
Nominator position:					
4. Current and past employment					
Detail your current or past employment that is relevant to the nominated position, including position title and length of service.					





5.	Qua	lificati	ons and	l train	ing

Detail any qualifications or training relevant to the	nominated position or the functions of the board.				
6. Statement of suitability					
Provide a short statement indicating why you are interested in serving on the board, including information on any skills or experience you would bring to contribute to the functions of the board.					
7. Additional information for nominations for the Chair of the Disciplinary Committee					
Do you have a current practising certificate?	☐ Yes ☐ No				
What type of practising certificate do you hold?					
Detail your practising history, including current and former employers and length of service.					

Please email completed nomination forms to $\underline{agd.ntworksafeadminstration@nt.gov.au}$