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

1. **Which position you are nominating for?** (Select one only)

[ ]  Representative of employers of electrical workers

[ ]  Representative of electrical workers

[ ]  Representative of the community

[ ]  Representative of the Territory

[ ]  Representative of electrical training bodies

[ ]  Chair of the Disciplinary Committee (Please ensure section 7 is completed)

1. **Nominee Details**

|  |  |
| --- | --- |
| Given name(s): |       |
| Family name: |       |
| Phone number: |       | Email: |       |
| Residential address: |       |

1. **Source of nomination**

|  |  |
| --- | --- |
| [ ]  Self-nomination (continue to section 4) | [ ]  Nominated by organisation |
| **Details of nominating organisation** |
| Organisation name: |       |
| Nominator name: |       | Email: |       |
| Nominator position: |       |

1. **Current and past employment**

|  |
| --- |
| Detail your current or past employment that is relevant to the nominated position, including position title and length of service. |
|       |

1. **Qualifications and training**

|  |
| --- |
| Detail any qualifications or training relevant to the nominated position or the functions of the board. |
|       |

1. **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. |
|       |

1. **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 agd.ntworksafeadminstration@nt.gov.au