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**Community Investment Funding Panel Nomination Form**

*Please note that this form must be typed and not hand written.*

**Part One**

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| Full name of person who is nominating: |  |
| Associated community organisation: |  |
| Contact phone number: |  |
| Email : |  |

**Part Two**

**Candidate Personal Profile**

The purpose of this section is to provide information to Council whom are responsible for approving the final panel appointment (CIF Panel Terms of Reference A2093465). If shortlisted information may be used in the community selection process and made available to the public.

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| Candidate’s Full Name: |  |
| Mailing Address: |  |
| Postcode: |  |
| Suburb: |  |
| Town/City: |  |
| Daytime Telephone: |  |
| Mobile: |  |
| Personal Email: |  |
| Gender (please highlight applicable): | Male Female |
| Age group (please highlight applicable): | Under 25 25 – 45 45 – 64 Over 65 |
| Ethnicity: |  |

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| --- |
| 1. Please outline your experience working in the community and voluntary sector, (as an employee and or in a voluntary capacity), including your current employment status. |
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| 1. Please outline your qualifications and abilities that will assist you in making an effective contribution to the work of the Community Investment Funding Panel. |
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| 1. Please outline your interest in, and reasons for standing as a candidate. (If your nomination is shortlisted, this response will be used as your candidate profile and promoted publicly.) |
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**Please read and sign the following declaration**

I declare that:

* I have read the Community Investment Funding Panel Terms of Reference (A2093465) and will adhere to the requirements of panel members if elected;
* There is nothing in my financial or personal history that may bring the operation of the Community Investment Funding Panel into disrepute;
* The details given in Part One of this form concerning my nominator are correct;
* I acknowledge that if I am elected and it is subsequently discovered at any time that I have made a false statement in this declaration, the process to remove me as a Community Investment Funding Panel member will commence;
* I understand that the person nominating me may be contacted for further information to support my nomination;
* I consent to my nomination.

Nominee’s Signature: Date:

Once completed, please email this form to [nicola.gausel@ncc.govt.nz](mailto:nicola.gausel@ncc.govt.nz) by 25 March.