

COMMITTEE NOMINATION FORM

Application to be a member of the _____ Committee

Applicant Name: _____ Date: _____

Address: _____

Contact Details:

Phone: _____ Mobile: _____

Email: _____

Applicant Qualifications:

Reasons for Membership:

Other Comments:

PRIVACY STATEMENT

Snowy Valleys Council (council) is collecting your personal information solely for the purpose of administering this application. Council will take all reasonable and appropriate steps to protect the privacy of individuals having regard to the requirements of the *Privacy and Personal Information Protection Act 1998* and the *Government Information (Public Access) Act 2009*. Council will not disclose your personal information to any person or body if it is not directly related to the purpose for which the information was collected. Questions concerning privacy or the use of your personal information may be referred to Council's Public Officer.