

# **Expression of interest form**

### **Surf Coast Shire Positive Ageing Advisory Committee**

The purpose of Positive Ageing Advisory Committee is to collect and consider evidence, ideas and community input about how Council can best create an Age Friendly Surf Coast where older people and people with a disability are valued, supported and empowered to live well, including but not limited to these topics:

- Social inclusion, social and civic participation
- Built environment, transport and housing
- Community support and health services.

Committee members must be prepared to contribute to the advice to Council on important issues affecting older people and people with a disability. These voluntary roles are highly valued and genuinely make a difference for people in Surf Coast Shire Communities.

#### Do you tick one of these boxes?

Interested in issues affecting older people.
Experience of working or volunteering within the community.
Ability to commit to 2 to 3 hours at least once every two months to attend meetings, with more meetings likely in the early stages of the Committee.
Ability to listen to others, contribute ideas and suggestions within the group for Council to consider.
Someone who resided in the Surf Coast Shire; or
Someone who is a client of Surf Coast Shire Positive Ageing Service, or
Someone who is a carer or family member of a client of Surf Coast Shire Positive Ageing Service?
Experience in working in organisations that support older people or people with a disability or someone with detailed knowledge/experience in the sector

Further information about role and purpose of the Advisory Committee are contained in the Terms of Reference.



Please contact Bronwyn Saffron, Manager Aged and Family, for further information and assistance with submitting this application form.

Phone: 03 5261 0600 or email: bsaffron@surfcoast.vic.gov.au

Applications close at 5pm on Friday 28 September 2018

#### **Send your Expression Of Interest Form To:**

Bronwyn Saffron Manager Aged and Family C/O Surf Coast Shire Council, PO Box 350, Torquay Vic 3228

## **Application for Positive Ageing Advisory Committee**

Please note: Applicants may be required to attend an interview for this position.

	email:	
Please pro	ovide a response to the following	questions in your application:
	A carer or family member of a client An interested Surf Coast Shire come Someone with experience in working	ability service. of Council's aged or disability services. of a non-Council aged or disability service.
Other		

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2.	Council values the participation of its diverse community and will make any reasonable adjustments to help you participate in the Advisory Committee. Do you require assistance to participate in the Advisory Committee, for example transport to meetings? Please provide details of any assistance required.
3.	Please describe in a sentence or two, why you are interested in joining the Positive Ageing Advisory Committee at Surf Coast Shire Council
4.	Please tell us about your experience and/or knowledge in the areas of community services, aged services and working with voluntary committees



5.	What are the main skills and perspectives you can contribute to the Advisory Committee?
6.	Can you describe your availability to commit to attending bi-monthly meetings at the Surf Coast Shire Council Offices in Torquay?
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<i>(</i> .	Do you currently work in, or know someone who works in the aged care or disability sector? If yes, how will you manage any potential conflicts of interest?



8.	. As a volunteer member of the Positive Ageing Advisory Committee, are you willing to obtain a volunteer Working with Children's Check and a police check? Note: any costs associate with these checks will be covered by Council.							
	Yes		No					
9.	Do you have	any other c	omments you	would l	ike to include in	your application	n?	

The personal information requested on this form is being collected by Council for the purposes of advertising an expression of interest for the Positive Ageing Advisory Committee. The personal information will be used solely by Council for this primary purpose or directly related purposes only. By completing and submitting this form the applicant understands that the personal information is provided for these purposes and they may apply to Council for access and/or amendment of the information.

Thank you

If you are successful in being selected for the Positive Ageing Advisory Committee you will be required to complete a conflict of interest declaration.

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