

2024 RDAQ BOARD NOMINATION FORM

l,(p	lease print name), Chair / Secretary /
Treasurer (please circle) of the	RDA Centre wish to nominate
	(please print)
to fulfill the responsibilities of the below position Position Description: (please tick)	on/s, as detailed in the RDAQ Board Member
☐ CONSUMER REPRESENTATION	TIVE: NON-RIDING
☐ HORSE MANAGER REPRES	ENTATIVE
(NB illiancial members of a weinber centre ca	an be nominated for more than one (1) position) nature) / /
Seconded By:	Seconded By:
Name:(print)	Name:(print)
Position:	Position:
Signature: Date: / /	Signature: Date: / /
I,	_ (the nominee) confirm that I:
$\hfill\Box$ am a curent financial member of the above	RDA Centre
\square have read the RDAQ Board Member Positi	on Statement, and
$\hfill \square$ have the necessary skills and experience \hfill	equired by the position.
I wish to accept the nomination and submit the nomination.	e attached information in support of my
Signature:	Date: / /

Nomination Forms must be emailed to rdaq.agm@gmail.com by 4pm, Wednesday 4th October 2023



Skills and Experience

1.	Please outline the relevant experience, skills, and qualifications you would bring to
	the nominated position/s (max. 300 words / dot points)

2. Please describe your understanding of the word "disability" and the role RDA centres can play in the lives of people living with disabilities in Queensland. (max. 300 words)



 As a representative on the RDAQ Board, you will be asked to work with people from a range of professional and cultural backgrounds across a large geographic area, please describe how you would support them to deliver the best possible service to people living with disabilities in their area (max. 300 words) Please outline previous experience you have had serving on an advisory committee & / or Board of Management. (max.200 words) I understand that I will be required to undertake an induction to the RDAQ Board II understand that I may be asked to travel to workshops and or RDA Centres across Qld. Il understand that I will be required to submit a copy of my qualifications and my Police learance to the RDAQ office. (Please Initial) 		QUEENSLAND
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