



Aboriginal Community Advisory Group

Expression of Interest

Expressions of interest to be part of the Western Local Board
Aboriginal Community Advisory Group

Expression of interest - Aboriginal Community Advisory Group

The Expression of interest must be hand delivered, emailed or postmarked by 9 am on **Friday, 16 November 2018**

Expression of interest process:

Complete this expression of interest form by filling out the personal details, answering the following questions (up to half a page for each) and providing your referee information.

Purpose of the group:

The Western Local Board recognises the importance and value of traditional knowledge in the management of natural resources and productive agricultural land throughout the Western region. Western Local Land Services encourages the Aboriginal community to share their insights and knowledge and seeks to establish one Aboriginal Community Advisory Group to work in partnership to guide this process.

The Aboriginal Community Advisory Group is a high level advisory group of key Aboriginal community stakeholder representatives that provide technical advice to assist Western Local Land Services in its delivery of services and functions.

Please ensure you have read and understood the draft Terms of Reference documentation, which can be downloaded from www.ils.nsw.gov.au/western or picked up at any Western Local Land Services office.

Once the new group has been formed, they will finalise the Terms of Reference.

Contact and personal details

Name	
Mailing Address	
Telephone	
Mobile	
Email	
Do you identify as Aboriginal and/or Torres Strait Islander	

Do you represent a community group, working party, Aboriginal organisation?

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Q1. Do you have any previous experience in advising on Aboriginal cultural heritage, natural resource management or caring for country?

Q2. What contribution could you make to the Aboriginal Community Advisory Group?

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Q3. Please outline your experience in working with Aboriginal communities and collaborating with others.

Q4. Tell us how you will seek input from and provide feedback to your community on the issues dealt with by the Aboriginal Community Advisory Group.

Please provide the names of two referees who would support your expression of interest.

Referee 1:

Name:	
Phone:	
Organisation / affiliation (if relevant):	

Referee 2:

Name:	
Phone:	
Organisation / affiliation (if relevant):	

Applicant declaration:

I _____ declare that the information provided in this Expression of Interest is complete and correct.

Signed: _____ **Date:** _____

Send your expression of interest to:

Post:

Western Local Land Services
PO Box 307, Cobar NSW 2835

Email:

admin.western@lls.nsw.gov.au