The Management Committee of Independent Advocacy in the Tropics Inc. (the Association) consists of a President, Vice-President, Treasurer, Secretary and two (2) other members of the Association, a simple majority of whom, including the President, shall be ordinary members of the Association who have a disability.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | | |
| **Address:** |  | | |
| **Email:** |  | | |
| **Phone:** |  | **Date of Birth:** |  |
| **Relevant Experience and/or Employment (attach resume):** | | | |
| **Why are you interested in our organisation?** | | | |
| **Area(s) of expertise/contribution you feel you can make:** | | | |
| **Other volunteer commitments:** | | | |

|  |  |
| --- | --- |
| **On completion, please return to the Secretary.** | |
| 2/179-181 Ross River Road  MUNDINGBURRA QLD 4812  PO Box 3067  HERMIT PARK QLD 4812 | Phone: 1800 887 688  07) 4725 2505  Fax: 07) 4725 6106  E-mail: admin@iat.org.au |

**INTERNAL USE ONLY**

Nominee has had a personal meeting with either CEO,  
committee President, or other committee member: Date:

Nominee reviewed by the Management Committee: Date:

Action/Outcome taken by the Management Committee:

Returned to Office Administrator & File completed: Date: