



# Expression of Interest

## Local input networking and communications (LINC) committee member

|   |   |
|---|---|
| Residential College:  |   |
| Surname:  | Given names:  |
| Date of birth:  | Occupation:   |
| Address:  |   |
| Email:  | Telephone:  |
| Category of committee representation:      Parent <input type="checkbox"/> Community <input type="checkbox"/> Staff <input type="checkbox"/>  |   |
| What experience, skills, attributes or qualifications could you bring to the committee? <i>eg event coordination, youth work, fundraising, marketing, accounting.</i>   |   |
|   |   |
| Are you a member of any other organisation? If so, please indicate which one/s <i>eg CWA, Rotary, Scouts.</i>   |   |
|   |   |
| Do you have a Department of Education identification number?<br>Yes <input type="checkbox"/> No <input type="checkbox"/>  | If yes, please provide:<br>Number: E .....                          |
| Have you been issued a Department of Education Nationally Coordinated Criminal History Check (NCCHC)? <i>If not, or if it has expired, you will be required to obtain a new one prior to joining the committee.</i><br>Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, please provide:<br>Number: SCN .....<br>Date cleared: ..... |

Please post your expression of interest to Residential Colleges Branch, Department of Education, 151 Royal Street, East Perth WA 6004 or alternatively email it to [residentialcolleges@education.wa.edu.au](mailto:residentialcolleges@education.wa.edu.au)