**The Inclusion Circle Executive Committee Member**

**Expression of Interest Application 2023/24**

Thank you for your interest in becoming an Executive Committee member.

The Inclusion Circle provides an inclusive and collaborative community for individuals and organisations. Promoting thought leadership, practical advice and insights into new and progressive opportunities to advance diversity, equity and inclusive practice within the workplace and beyond. We are a membership based network of individuals and organisations committed to advancing diversity, equity and inclusion in the workplace and beyond. Our current list of members can be found here: [2023 Current Members](https://www.theinclusioncircle.org.au/current-members)

Please share details of your interest in joining The Inclusion Circle and the skills, strengths and experience which you are able to offer over the next twelve (12) months.

Note that to be considered for The Inclusion Circle Executive Committee, you must have been a The Inclusion Circle member for at least three (3) months prior to the Annual General Meeting.

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Company (if applicable) |  |
| Mobile Phone Number |  | Email Address |  |
| Current or previous The Inclusion Circle Committee Member? Y/N |  | Are you a current member? If yes, for how long? |  |

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| --- |
| Please provide a brief outline of why you are interested in this role with The Inclusion Circle including the skills, strengths and experience you would bring.  |
| *Throughout the year, The Inclusion Circle Committee Members are required to invest time on a voluntary capacity to attend committee meetings, events and follow up on actions committed to, at and in preparation for these. Please consider your availability and contact Alice Young or Kathleen Cullen to discuss further as required.* |

Please complete and submit all pages to info@theinclusioncircle.org.au no later than **COB Wednesday 7th June 2023**

|  |  |
| --- | --- |
| I  | *Nominating Member Name* |
| of  | *Organisation* |

Wish to express my interest in the position of (Please Tick):

* **President**
* **Vice-President**
* **Treasurer**
* **Executive Committee Member**

***The nomination must be supported by two (2) different financial members.***

|  |  |
| --- | --- |
| I | *Proposer Member name*  |
| of  | *Organisation* |
| Hereby Propose the Nomination |  |
| I | *Seconder Member name*  |
| of  | *Organisation* |
| Hereby Second the Nomination |  |

|  |
| --- |
| Please note: signature support via email will be accepted in lieu of your access to a printer and scanner: |
| Signatureof **Nominee** | *Date:* |
| Signature of **Proposer** | *Date:* |
| Signature of **Seconder** | *Date:* |

Please complete and submit all pages to info@theinclusioncircle.org.au no later than **COB Wednesday 7th June 2023**