## Disability Access and Inclusion Advisory Committee: Expression of Interest

We're looking for local people with lived experience of disability to advise Council on how we can improve access and inclusion and make Bayside better for everyone.

After a one year pilot program, Council unanimously decided to have an ongoing Disability Access and Inclusion Advisory Committee in May 2022.

Expressions of interest to join or continue to be a member of the Disability Access and Inclusion Advisory Committee are now open until 13 June 2022.

The Committee is formed of 10 community members with lived experience of disability and two elected Councillors.

Many members of the pilot committee will be continuing on, but there will be a small number of vacancies which brings a great opportunity to further diversify the Committee's membership.

All information you provide on this form is confidential. We are asking these questions to help us bring together a diverse group.

To express your interest in joining, please complete the form below and send it to Andrew Shannon via:

- Post: Bayside City Council, PO Box 27, Sandringham VIC 3191
- In-person: Bayside City Council, 76 Royal Avenue, Sandringham, 3191
- Email: AShannon@bayside.vic.gov.au
- Phone: 9599 4676

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Are you a current member	of the Disability	y Access an	nd Inclusion	Advisory
Committee?				

•	nittee?	, (a. v. 100)
0	Yes	
0	No	
	you previously applied to be a member of the Disability Accion Advisory Committee?	ess and
0	Yes	
0	No	

If you are a current member of the Committee or have made an application to join previously and you would like Council to use your original application, please select write your name below and return this form to Andrew Shannon via the contact details above. You do not need to complete any other question.

If this is your first application, or you wish to make a new application, please complete all questions on this form and return it to Andrew Shannon via the contact details above.

rour name			

Gender	
○ Female	
○ Male	
<ul> <li>Other identity</li> </ul>	
O Prefer not to say	
Please select your age group	
O 18 – 24	O 45 – 54
O 25 – 34	○ 55 – 64
O 35 – 44	○ 65 – 74
O 45 – 54	○ 75+
Preferred phone	
Email	
Home Address	
Suburb	Postcode
Postal address (if different)	
Suburb	Postcode
Please tell us about why you a	are interested in being part of the Committee:

Please tell us about your experience of disability, for example, do you have a particular disability, or are you a carer for a person with a disability?				
Please tell us about community networks that you are part of, for example, school committee, disability peer support group, sports or activity club, service club etc.				
	_			
Which days would you be available for meetings?				
○ Monday				
O Tuesday				
O Wednesday				
○ Thursday				
O Friday				

Please read the Terms of Reference for the Advisory Committee and the Code of Conduct. These documents are available to view at <a href="mailto:yoursay.bayside.vic.gov.au/disability-advisory-committee">yoursay.bayside.vic.gov.au/disability-advisory-committee</a> or from Andrew Shannon <a href="mailto:ashannon@bayside.vic.gov.au">ashannon@bayside.vic.gov.au</a> or 9599 4676.

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