

Disability Access and Inclusion Advisory Committee: Expression of Interest

We're looking for a local person with lived experience of disability to help us improve access and inclusion and make Bayside better for everyone.

Expressions of interest to join the Disability Access and Inclusion Advisory Committee are now open from 17 January to 12 February 2023.

The Committee is formed of 10 community members with lived experience of disability and two elected Councillors. There is currently one vacant position, which brings a great opportunity to further diversity the Committee's representation.

All information you provide on this form is confidential. We are asking these questions to help us ensure we have a diverse representation of committee members.

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

- Post: Bayside City Council, PO Box 27, Sandringham VIC 3191
- In-person: Bayside City Council, 76 Royal Avenue, Sandringham, 3191
- Email: vkagonda@bayside.vic.gov.au
- Phone: 9599 4871

Are you a current member of the Disability Access and Inclusion Advisory Committee?

- ☐ Yes
☐ No

Have you previously applied to be a member of the Disability Access and Inclusion Advisory Committee?

- ☐ Yes
☐ 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 Vimbayi Kagonda 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 Vimbayi Kagonda via the contact details above.

Your name _____

Gender

- ☐ Female
☐ Male

Prefer to self-identify _____

- ☐ Prefer not to say

Please select your age group

☐ 18 – 24

☐ 25 – 34

☐ 35 – 44

☐ 45 – 54

☐ 55 – 64

☐ 65 – 74

☐ 75+

Preferred phone _____

Email _____

Home Address

Suburb _____

Postcode _____

Postal address (if different)

Suburb _____

Postcode _____

Please tell us about why you 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
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday

Please read the Terms of Reference for the Advisory Committee and the Code of Conduct. These documents are available to view at yoursay.bayside.vic.gov.au/disability-advisory-committee or from Vimbayi Kagonda or 9599 4871.

Please return this form to Vimbayi Kagonda via:

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