

# BARKLY REGIONAL COUNCIL



## Youth Advisory Council Nomination Form

### 1. NOMINATOR TO COMPLETE

I, First Name: \_\_\_\_\_ Family name: \_\_\_\_\_ am aged 18 years or over and am a resident of the Barkly region.

I hereby nominate:

First name: \_\_\_\_\_ Family name: \_\_\_\_\_ as a member of Youth Advisory Council.

I confirm that the nominee is between the ages of 14-18 years old at the time of nomination and regularly attends school within the Barkly region in accordance with the Youth Advisory Council Terms of Reference.

### 2. GUARDIAN(S) TO COMPLETE

I/We, the guardian(s) of the nominee, hereby confirm the nomination of:

First name: \_\_\_\_\_ Family Name: \_\_\_\_\_ as a member of the Youth Advisory Council.

Signature: \_\_\_\_\_

### 3. NOMINEE TO COMPLETE

I, First name \_\_\_\_\_ Family name \_\_\_\_\_, hereby consent to be nominated as a member of the Youth Advisory Council for a period of 24 months.

I declare that I am eligible to be nominated as a member of the Youth Advisory Council because I am aged between 14 and 18 years old and regularly attend school in the Barkly region.

Signature of Nominee    Date

\_\_\_\_\_

Steve Moore – Chief Executive Officer

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