****

**Nomination for Equestrian Australia Driving Committee**

**DRIVERS’ REPRESENTATIVE**

|  |
| --- |
| Committee Information:  |
| Committee Name: |
| Application Closing Date: |

|  |
| --- |
| Personal Details:  |
| Name: | EA Member No: |
| Street Address: |
| Suburb: | State: | Postcode: |
| Email: |
| Mobile: | Telephone: |

|  |
| --- |
| Business Skills and Experience:(Include Training and Education) |
|  |

|  |
| --- |
| “Sport Governance” Skills and Experience:(memberships, Committee Experience) |
|  |

|  |
| --- |
| Sport Knowledge and Involvement (Achievements & Participation as a Driver) |
|  |

|  |
| --- |
| Time Willing To Dedicate to Committee Duties(Review of Documentation, Assistance to National Office, Projects etc) |
| Number Of Hours: |

|  |
| --- |
| Declaration:  |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have read the EA Committee Bylaws and Position Description for the National Committee and understand the commitment in time and contribution I am expected to make. I confirm that I meet the requirements to be a Committee Member of EA, in terms of skills and the need to work for the good of Equestrian Australia and the sport itself.**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |