

LCAQD Nomination Form

For membership of LCAQD Governing Body / Boards / Councils / Committees:
LCAQD DCB, Council for Lutheran Services

Role on that body: Member

Note: Some groups have specific membership/role requirements. Please refer to the membership criteria in the board/committee's Terms of Reference.)

Name Janice Smith			
Address 30 Wattle Street Midtown		Postcode 4567	
Please select one *	Metropolitan	Regional	Rural
Gender *	Female	Year of birth*	1966
Occupation	General Practitioner		
Phone	3777 9999	Mobile	0412 345 678
Email	jsmith@wonky.com.au		

* This information is requested so that due regard is given to geographic and gender balance to enable a broad cross-section of the interests and needs of the church to be heard. This information will remain confidential to those involved in the nominations process.

Currently member of Council for Lutheran Services <i>(insert name of Governing body)</i>
Commencement year on Governing Body 2012
Congregation Midtown Lutheran Congregation
Current involvement in congregation and/or parish Worship Planning Team; Member of congregation Council
Leadership experience at Congregation/Parish, District and/or national LCA level Past Congregation Council Chair; past member of BLACA; vice-Chair Lutheran Services Council
Skills and experience relevant to this role <ul style="list-style-type: none"> Past and present governance experience at congregation and District level (Lutheran Services Council) Past membership of AMAQ Board Working as a GP I have an understanding of the needs of the elderly. I am currently involved with the Sunnyside Aged Care facility (not Lutheran) as a visiting GP where I am in regular contact with residents (at all levels of care) as well as staff.
Education/qualifications/governance training completed <ul style="list-style-type: none"> Medical training, and also member of RACGP Regular PD with Better Boards and AICD.
Give a brief statement about your reasons for nominating for this role I believe that my work experience can add value to the governance decisions that must be made by the Church in the current climate where Aged Care is under the spotlight of the Royal Commission.

Furthermore I believe that I have the experience to assist the LCAQD in all its considerations as a member of the District Church Board. I have been a member of the Church since birth and would like to assist in ensuring that it remains relevant to the community where we serve.

Further relevant information (not more than 2 pages) may be attached.

- By seeking this nomination, I agree to actively participate in all aspects of the role to which I may be appointed including completion of any induction/orientation program, preparing for and attending meetings, making a positive contribution to the matters under discussion and undertaking tasks that may be allocated to me at meetings from time to time.
- I have access to reasonable internet connection in order to receive emails and participate in possible online meetings.
- I declare that I am neither an undischarged bankrupt nor subject to a personal insolvency agreement. I have never been convicted of fraud or any other offences under company law.
- I am eligible to work with children and vulnerable people and will keep this certification current while serving under a LCAQD appointment. **Please attach a copy of any applicable documentation e.g. current Blue Card and/or relevant certification.**
- I have undertaken Professional Standards training or am willing to do so.
Completed at my congregation April 2017.
- If this nomination is not successful, I agree to my details being kept for consideration for other governing bodies and being recorded on an LCAQD database.

Signature _____ Date _____

REFEREE 1

*For lay members: your congregation pastor
(in a vacancy, your former congregation pastor)*

For pastors: your District Bishop

Name **_Rev Patrick Fitzwilliam_**

Phone **0423 456 789**

Email p.fitzwilliam@lca.org.au

REFEREE 2

Another person who will confirm your suitability

Name **Sam Miller (cong Chair)**

Phone **0434 567 890**

Email smiller@wonky.com.au

Please submit this form to secretaryDCC@qld.lca.org.au
Thank you.

LCAQD Nominations Committee