**WSKRA Inc**

**Expression of Interest to be a WSKRA Committee Community Member**

I, ………………………………………………………………………, having read the criteria to be a WSKRA Committee Member and the WSKRA Terms of Reference accept and agree with them and hereby put myself forward for consideration to be a member of the WSKRA Committee. I have applied for membership in the requisite time period.

In support of my application I make the following statement…

Signed:

Date

Criteria: Members of the WSKRA Committee are expected to demonstrate capacity to form respectful and effective relationships across the committee, the community, and with local and state government agencies in order to advance the Community Renewal Plan. Computer literacy, understanding of privacy principles, availability to participate in meetings (often by teleconference) and some understanding of recovery processes for disaster – impacted communities is desirable. Committee members, secretary and treasurer can expect to commit up to 1 day per fortnight to the role. Co-chairs may average three days per fortnight.

**Nomination form to be a WSKRA Office Bearer**

I wish to nominate for the following position on the WSKRA Committee

Co-Chair

Secretary

Treasurer

Candidate: Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature indicating consent to nomination\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposer: Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature indicating consent to nomination\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seconder: Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature indicating consent to nomination\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

The Candidate, Proposer and Seconder must all be ratified members of WSKRA at the date of nomination or the nomination will be void.

Membership application forms must be submitted to [wskrasn@gmail.com](mailto:wskrasn@gmail.com) by February 11, 2018, and Committee/Office Bearer forms by February 18, 2018. A copy of these forms may be obtained by emailing [wskrasn@gmail.com](mailto:wskrasn@gmail.com)