

Nomination Form

Inclusive Sport SA Director, 2021

Nominee Personal Information

Full Name			
Title			
Residential Address			Postcode:
Postal Address			Postcode:
Telephone	Home:	Business:	Mobile:
Email	Home:	Business:	
Gender			Date of Birth:

Skills and Experience of Nominee

Please attach a CV which outlines your:-

- **Education** (Institution, Speciality, Degree, Dates)
- **Current Employment** (Employer, Position, Responsibilities, Dates)
- **Previous Employment** (Employer, Position, Responsibilities, Dates)
- **Other Directorships or Committees** (Body, Position, Dates)
- **Referees** (at least two)

Nominee Summary

Please describe your knowledge, qualifications and experience and how they can be utilised to support the Vision and Purpose of Inclusive Sport SA.

Empty response box for nominee summary.

Please outline your understanding of inclusion and interest in joining the Board of Inclusive Sport SA.

Empty response box for understanding of inclusion and interest in joining the Board.

Nominee Declaration

I (Name) _____

of (Address) _____

Declare that:

- (a) The above information is true and correct
- (b) I declare that I am able to be registered with ASIC as a Director of Inclusive Sport SA
- (c) I agree to accept this nomination for the role of Director, and if elected, to be bound by the Constitution and Policies of Inclusive Sport SA Incorporated

Name _____

Signature _____

Date _____

Completed nomination forms to be submitted and addressed to:

John Cranwell
Chief Executive Officer

Via:

Email: jcranwell@inclusivesportsa.com.au

Mail: Inclusive Sport SA Inc.
PO Box 63
TORRENSVILLE PLAZA SA 5031