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| **application form**  Panel Member  **WORKER CARER EXCLUSION SCHEME PANEL** | | | | |  |
| **Name of Entity** | Worker Carer Exclusion Scheme Panel | | | | |
| **Position applying for** | Panel Member | | | | |
| **Title** | Ms  Mr  Mrs  Miss  Dr  Other  \_\_\_\_\_\_\_\_ | | | | |
| **Name in Full** |  | | | | |
| **Preferred name (if any)\*** |  | | | | |
| **Date of Birth\*** | ……../……../……….. | | | | |
| **Gender** | Woman  Man  Non-binary  Prefer not to say  I use a different term  Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Residential address and postcode** |  | | | | |
| **Telephone (provide at least one)** | \*Business | After Hours | Mobile | | |
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| **Email Address** |  | | | | |
| **Questions marked with an asterisk (\*) are optional. If you provide this information, it may be used by the Department of Premier and Cabinet, and the Victorian Public Sector Commission (VPSC) to measure diversity in appointments and composition of bodies.** | | | | | |
| **Do you identify as Aboriginal or Torres Strait Islander? \*** | Yes – Aboriginal  Yes – Torres Strait Islander  Yes – both Aboriginal and Torres Strait Islander  Prefer not to say  No | | | | |
| **Were you or one of your parents born overseas? \*** | Yes  No  Prefer not to say | | | | |
| **What country were you born in? \*** | Country:  Prefer not to say | | | | |
| **Which language do you mainly speak at home? \*** | Please specify: [Note language spoken at home here] Prefer not to say | | | | |
| **Do you identify as being culturally and linguistically diverse? \*** | Yes  No  Prefer not to say | | | | |
| **Do you identify as belonging to the LGBTIQA+ community?** | Yes  No  Prefer not to say | | | | |
| **Would you like to share if you’re a person with a disability? \*** | Yes  No  Prefer not to say | | | | |
| **Have you lived overseas in the last 10 years for greater than 12 months** | Yes  No | | | | |
| **Current position/company**  **(Include year commenced)** | [Please complete for current paid role, title, company and year started] | | | | |
| **Current board and committee roles, including as Chair** | [Please complete for current Board/Committees and year commenced] | | | | |
| **Core Skills/Areas of Expertise** | | | | | |
| Based on your qualifications and experience, please select the area you consider to be your primary area of expertise that you will bring to the board. | **Primary Areas of Expertise**  • Law  • Social work  • Psychology  • Behaviour of criminal offenders  • Another relevant discipline  Please detail: | | | | |
| Please select any areas you consider to be your secondary/additional skillsets that you will bring to the board. | **Secondary Areas of Expertise**  • Law  • Social work  • Psychology  • Behaviour of criminal offenders  • Another relevant discipline  Please detail: | | | | |
| Please detail any languages spoken and proficiency levels | **[List of languages and description of proficiency, e.g. business level, spoken only]** | | | | |
| **Statements** | | | | | |
| **Statement 1**  Please write a statement of 150 – 200 words describing the leadership skills, expertise and the attributes you would bring to the Scheme Panel. |  | | | | |
| **Statement 2**  Please write a statement of 150 – 200 words describing your commitment to promoting the safety of children and young people in out-of-home care. |  | | | | |
| **State 3 (availability)**  Please write a statement of 150 – 200 words describing how you will manage the time commitment for the WCES Panel. | Please note how you will manage the time required with your paid work or other Board/Committees | | | | |

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| **Referees**  Please list below the details of two professional/Board/Committee referees who may be contacted if you are considered for interviews (April to June 2025). Ensure to include all fields: | |
| **Referee 1** | Name: |
| Title: |
| Organisation: |
| Contact number: |
| Email (work email preferred): |
| LinkedIn or corporate URL weblink: |
|  | Describe your professional or Board/Committee relationship: |
| **Referee 2** | Name: |
| Title: |
| Organisation: |
| Contact number: |
| Email (work email preferred): |
| LinkedIn or corporate URL weblink: |
|  | Describe your professional or Board/Committee relationship |

**PRIVACY**

Your information will be stored in the Department of Families, Fairness and Housing and Public Entities database (GAPED) and will be assessed by authorised government officers and state departments. Wherever practicable, the information stored in GAPED will be made available to authorised personnel in a de-identifiable format to allow accurate reporting on board profiles.

Limited information is provided on a publicly available Victorian government website. This includes first name, surname, the term of current appointment and position on the board. Further information is available from the Department of Premier and Cabinet at <https://www.vic.gov.au/department-premier-and-cabinet-privacy-policy>

SHK Asia Pacific, known as SHK, are assisting the Department of Premier and Cabinet (The Department) with this process.

SHK’s privacy policy is available on shk.com.au. SHK and the Department treat all personal information provided by an individual in support of an appointment application in accordance with the Privacy and Data Protection Act 2014 and the Public Records Act 1973.

When you provide us with information about other individuals, we rely on you to make them aware that such information will or may be provided to us as part of the application process.

Please attach a full and detailed Personal CV to include the information summarised against the Key Selection Criteria from Page 11 onwards in the Applicant Information Pack. Please note, this Application Form document serves as a substitute for a cover letter, a separate cover letter is not necessary.

**CONSENT**

I consent to SHK and the Department’s use of personal information on this form and in my accompanying personal resume (including any sensitive information such as racial or ethnic origin, and health information such as whether I have a disability) as part of administering appointments to statutory authorities and advisory committees. This information may be included in submissions to Cabinet and/or Governor in Council and shared with other Victorian public sector organisations involved in the administration of appointments. Where you do not provide the information required by this form, we may be unable to process your application. Should you wish to gain access to your personal information held by the Department of Premier and Cabinet, please contact the Department’s Freedom of Information Unit via ‘dpc.privacy@dpc.vic.gov.au’.

The Department requests your permission for:

• personal information to be entered onto the Government Appointed Public Entities Database

• this personal information to be shared between other government departments

• limited personal information, as previously described, to be made publicly available on a Victorian Government website.

I also consent to providing a completed Declaration of Private Interests, and grant permission for the conduct of probity checks, which will consist of:

• a criminal record check Australia wide by Crim Trac or a licenced probity company

• a check of the Australian Securities and Investment Commission (ASIC) register of persons prohibited/disqualified by ASIC under the provisions of the Corporations Act 2001

• a check of the Australian Financial Security Authority (AFSA) National Personal Insolvency Index which contains information about proceedings and administrations under the Bankruptcy Act 1996.

I grant permission for inquiries that may be made to establish the accuracy of any of the information provided by me in this form and accompanying attachments and to determine my suitability for nomination and I understand that these inquiries will involve the disclosure of my information for these limited purposes. I understand that the Offices of the Minister and the Parliamentary Secretary, of the Department and selection panels may make these inquiries of any persons or organisations they consider appropriate.



Signature: Date:

**OR**

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| --- | --- |
| If you can’t sign please tick here | Not applicable as I have signed above  CONFIRMATON I am submitting via online means (DD/MM/YYYY) |

To receive this document in another format or if you require specific assistance (on accessing the documents, we can’t advise on content inclusions) please **email** Senior Partner Penny Wilson on [penny.wilson@shk.com.au](mailto:penny.wilson@shk.com.au) or Associate Partner Lilli Vagnarelli on [Lilli.Vagnarelli@shk.com.au](mailto:Lilli.Vagnarelli@shk.com.au)

Or call SHK on +61 3 8620 8000 and describe your need, or the language you require, and we will endeavour to assist.

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| **Check List** | |
| **Have you filled in all required fields?** | * Name * Address * Phone * Email * Optional personal details * Primary skills (up to three) * Secondary skills (up to Three * Languages * Statements x3 * Referees x2 * Signature OR online submission confirmation box   **Please lodge the Application Form in place of a ‘cover letter’,** in addition to your Resume (CV) at the SHK application point on the advertisement at ‘apply for this job’ (a button at the top right of the screen).  Your CV should address the criteria in the Application (candidate) Information Brief.  See the Candidate Information Brief for more information, available within the SHK advertisement.  Thank you for your participation. |