

# WAGPAG Expression of Interest

## Eligibility criteria

The eligibility requirements to be a voting member of the WAGPAG include all the below:

- Must be an Aboriginal and/or Torres Strait Islander person.
- Live, work or study in the City of Whittlesea for the duration of the WAGPAG appointment.
- Agree to the WAGPAG purpose and Aboriginal Gathering Place vision.
- Follow the City of Whittlesea's Code of Conduct.
- Agree to attending a minimum of four ordinary meetings per year and all WAGPAG planned events.
- Cannot be a current employee of the City of Whittlesea or an employee who has left the City of Whittlesea within a two-year period.
- Agree to have a current Police and Working with Children Checks conducted.

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|--------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>First Name: *</b>                             | <b>Last name: *</b>                                                                                                                                                                                                                        |
| <b>Contact number: *</b>                         |                                                                                                                                                                                                                                            |
| <b>Email: *</b>                                  |                                                                                                                                                                                                                                            |
| <b>Emergency contact</b>                         | Name:<br>Contact number:                                                                                                                                                                                                                   |
| <b>Which area do you live, study or work in?</b> | Suburb:                                                                                                                                                                                                                                    |
| <b>Are you an Elder?</b>                         | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                                                                                                                                                                |
| <b>What is your age group? *</b>                 | <input type="checkbox"/> 18–24 years<br><input type="checkbox"/> 25–34 years<br><input type="checkbox"/> 35–44 years<br><input type="checkbox"/> 45–54 years<br><input type="checkbox"/> 55–64 years<br><input type="checkbox"/> 65+ years |
| <b>What gender do you identify with? *</b>       | <input type="checkbox"/> Man<br><input type="checkbox"/> Woman<br><input type="checkbox"/> Non-binary<br><input type="checkbox"/> Prefer not to say                                                                                        |

### Council Offices

25 Ferres Boulevard, South Morang VIC 3752  
**Mail to:** Locked Bag 1, Bundoora MDC VIC 3083

**Phone:** 9217 2170

**National Relay Service:** 133 677 (ask for 9217 2170)

**Email:** [info@whittlesea.vic.gov.au](mailto:info@whittlesea.vic.gov.au)

Free telephone interpreter service

 **131 450**

ABN 72 431 091 058

[whittlesea.vic.gov.au](http://whittlesea.vic.gov.au)

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| <b>Are you Rainbow Mob?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Prefer not to say |
| 1. Briefly tell us why you are interested in joining WAGPAG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                           |
| 2. Do you identify as Wurundjeri (Traditional Owner), Taungurung (Traditional Owner), Aboriginal and/or Torres Strait Islander?<br><br>If yes, who is your mob?<br><br>Membership of the group will reflect the richness and diversity of our First People's community. We are looking for people who bring different skills and perspectives to support the success of the Aboriginal Gathering Place.<br><br>We are committed to creating a <b>safe and respectful space</b> and will support members to fully participate. We strongly encourage people who identify as LGBTQIA+ and those living with disabilities to apply. |                                                                                                           |
| 3. Do you have lived experience of disability that you would like to share in this advisory role? (This may include your own experience or that of a family member, carer, or community.)<br><br><i>Council is committed to creating an inclusive and accessible advisory environment. If you require any adjustments to participate, please let us know.</i>                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Prefer not to say |

|                                                                                                                                                                                                                                                                                                                                                                                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>4. Please outline your previous experience across your career and community involvement.</p>                                                                                                                                                                                                                                                                                  |  |
| <p>5. Please describe your role in work or study, and whether you temporarily or permanently live within the City of Whittlesea.</p>                                                                                                                                                                                                                                             |  |
| <p>6. What skills and knowledge would you contribute to supporting the future sustainability of the Aboriginal Gathering Place?</p>                                                                                                                                                                                                                                              |  |
| <p>7. How would you ensure community voices are heard, respected and embedded when contributing to decisions at the Aboriginal Gathering Place?</p> <p>Describe an example of how you would both;</p> <ul style="list-style-type: none"> <li>- Support the purpose of the Aboriginal Gathering Place</li> <li>- Support transition to an independent governance model</li> </ul> |  |
| <p><b>During the recruitment process we can provide support for our applicants, where possible.</b></p> <p><b>To understand what type of support you might need, please answer the following:</b></p>                                                                                                                                                                            |  |

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>a. What additional accessibility requirements need to be implemented?</p> <p>b. What arrangements can we put in place to help you to fully participate in the advisory group?</p> |                                                                                                                                                                                                                                                                                                               |
| <p><b>Where did you hear about this opportunity? *</b></p>                                                                                                                           | <p><input type="checkbox"/> Newsletter</p> <p><input type="checkbox"/> Social media</p> <p><input type="checkbox"/> Email subscription</p> <p><input type="checkbox"/> Radio</p> <p><input type="checkbox"/> City of Whittlesea staff member</p> <p><input type="checkbox"/> Other (Please specify below)</p> |

Thank you for your interest in the applying to participate in the WAGPAG.

It will be a fair, equitable and competitive process, we will notify all applicants of the outcome.

**Sign**

**Date**