

NOMINATION FORM

For the position of Meaningful Ageing Australia
Board Director



PERSONAL AND CONTACT INFORMATION OF NOMINEE

Full name of nominee	Former name (if any)
Residential address	Post code
Telephone no.	Mobile telephone no.
Email address	LinkedIn profile
Date of birth	Place of birth

ORGANISATION INFORMATION

Name of organisation	
Role	No. of years/months in current role

DIRECTOR POSITION

This nomination is for the **Meaningful Ageing Australia Board Member** position on the Meaningful Ageing Australia Board and is for a three-year term. The nominations process must be made in writing, signed by two members of the organisation and accompanied by the written consent of the candidate.

Two member organisations of the organisation duly signed:

(Name of member organisation)	(Name of member organisation)
(Print name of member representative)	(Print name of member representative)
(Signature)	(Signature)
(Date)	(Date)

APPLICANT'S INFORMATION

Please provide a current photograph and a brief statement as to why you are interested in the role of Director (150 words or less)

Qualifications and professional memberships – please list

Brief summary of relevant professional background *(150 words or less)*

Relevant current and past service on boards, committees, councils, community groups, government agencies

(Please include organisation name, position held and duration e.g. 2016-2020)

STATEMENT OF SUITABILITY (this will be used in voting information for members)

Please make a brief statement in support of your nomination addressing your suitability for the role of Director on the Board of a national peak body (175 words or less)

NOMINEE CONSENT AND DECLARATION

I declare that the information I have provided in this Nomination Form for the position of Director on the Meaningful Ageing Australia Board is true and correct.

I consent to my nomination for a Director position on the Meaningful Ageing Australia Board and I consent to act as a Director of Meaningful Ageing Australia if appointed.

I declare that:

- I am not disqualified from managing a corporation, within the meaning of the Corporations Act 2001;
- I have not been disqualified by the Australian Charities and Not-for-profits Commissioner at any time during the preceding year from being a responsible person (a 'responsible entity' of a registered charity);
- I am not an undischarged bankrupt;
- I am not subject to a personal insolvency agreement or an arrangement under Part X of the Bankruptcy Act 1966 (Bankruptcy Act) that has not been fully complied with;
- I am not subject to a composition under Part X of the Bankruptcy Act and final payment has not been made; or
- I have not been convicted of offences such as fraud or offences under company law (e.g. a breach of duties as a director or insolvent trading).

By signing this declaration, I acknowledge that I grant permission for probity checks to be conducted, which may consist of:

- a check of the Australian Securities and Investment Commission Register of persons prohibited/ disqualified under the provisions of the Corporations Act 2001;
- a check of the Australian Charities and Not-for-profits Commission Disqualified Persons Register; and
- a check of the Insolvency and Trustee Service Australia National Personal Insolvency Index which contains information about proceedings and administrations under the Bankruptcy Act 1996.

Duly signed:

(Print nominee name)

(Signature)

(Date)

Privacy Statement: Please note that all personal information collected will be dealt with in accordance with the Australian Privacy Principles as set out in the Privacy Act 1988 (Commonwealth) and the Privacy Amendment (Private Sector) Act 2000 (Commonwealth).

LODGEMENT OF NOMINATION

Nominees must sign and return this nomination form by **5.00pm on Thursday 11 November 2021 to:**

Company Secretary, Meaningful Ageing Australia
c/- Ms. Ilsa Hampton: ihampton@meaningfulage.org.au