

Mr Mark Arnold General Manager Byron Shire Council PO Box 219 MULLUMBIMBY NSW 2482

11 February 2020

Dear Mr Arnold

Arakwal National Park and Byron Coast Area Management Committees and Cape Byron Trust – Council nominees

I wish to thank the Byron Shire Council for continued involvement on the National Parks and Wildlife Service joint management committees.

Management committee members have played an important role in the conservation of nature and Aboriginal culture for national parks and nature reserves, and successfully implementing the Bundjalung of Byron Bay Arakwal Indigenous Land Use Agreements.

As the current appointments expire on 30 June 2020, I am seeking three councillor nominations, from which one will be appointed to the three committees for a four year term. For each nominee, please complete the nomination form enclosed.

Arakwal National Park Management Committee is established under section 24(3) of the National Parks and Wildlife Act 1974 (NPW Act) for the care, control and management of the Arakwal National Park and meets for about half a day every second month.

Byron Coast Area Management Committee is established under section 24(3) of the NPW Act for the care, control and management of Tyagarah, Brunswick Heads (south), Hayters Hill, Julian Rocks Nguthungulli, Cumbebin Swamp, Broken Head Nature Reserves and meets for about half a day every second month.

Cape Byron Trust is established under section 47GA of the NPW Act for the care, control and management of Cape Byron State Conservation Area and meets for about half a day every second month.

Please forward council's nominations by 20 March 2020, to: Ms Sue Walker, Area Manager, National Parks and Wildlife Service, PO Box 127, Byron Bay, NSW 2481 or by email at sue.walker@environment.nsw.gov.au.

If you have any questions about the nominations to the committees, Ms Sue Walker can be contacted on 02 66398300, or sue.walker@environment.nsw.gov.au.

Yours sincerely

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SUE WALKER Area Manager, Tweed Byron National Parks and Wildlife Service Enclosed – Nomination Form

> PO Box 127 Byron Bay NSW 2481 Tallow Beach Road Byron Bay Tel: (02) 66398300 Fax: (02) 66398333 ABN 20 770 707 468 www.nationalparks.nsw.gov.au



APPLICATION FORM FOR MEMBERSHIP

Arakwal National Park Management Committee, Byron Coast Area Management Committee and Cape Byron Trust

Personal details

Title First name:		
Middle name:	Surname:	
Date of birth:		
Residential address:		Postcode:
Unit / Street or lot number Street Postal address (if different to above):		Postcode:
Phone number:N	Vobile:	
Email:		
Other details		
Position applied for (eg member, representati	ve of organisation):	
Are you a public sector employee? Yes	/No If so, of which agency?	
Have you previously been a member of this co Are you currently a member of other go please list.		•

Special requirements in relation to the committee

claim through my CV or a referee report: (please only tick the criteria that apply to you): □ Well developed communication, liaison and negotiation skills □ Understand and value Aboriginal culture □ Understand and value national park management □ Understand and value the natural environment □ Understand and value the historical heritage □ Understand and value visitors and the local community □ Understand and value park management planning processes Additional information should be provided in a one page CV. This should only include your skills, experience and qualifications that relate to the committee. **Diversity information** Members of the community, including women, Aboriginal and Torres Strait Islander people, people of culturally diverse backgrounds, people with a disability and young people, are encouraged to apply for positions on NSW boards and committees.

I meet the following requirements for membership on the committee and am able to support my

Do you have a disability?	Yes / No	Please advise of any special needs to be accommodated:
What is your gender?	Male / Fema	le
Are you aged between 18 and 25?	Yes / No	
From a culturally diverse background?	Yes / No	Please provide details:
An Aboriginal or Torres Strait Islander per	son? Yes /	' No

Referees

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NSW Government agencies must conduct reference checks on people who apply for membership to boards and committees. Please provide two referees.

Referee 1
Name:
Position:
How does this person know you?
Contact details (phone number or email address):

Referee 2
Name:
Position:
How does this person know you?
Contact details (phone number or email address):

Authorisation and signature

I certify that my answers are true and complete to the best of my knowledge.

I approve the NSW Government undertaking the following probity checks, as deemed appropriate for applications to this committee: ASIC Banned and Disqualified search, ASIC Enforceable Undertakings Register search, Australian Financial Security Authority National Personal Insolvency Index search, NSW Police Force National Police Check and Office of the Children's Guardian Working with Children Check.

I acknowledge that if I am approved for appointment or reappointment to the committee, that I will be required to declare pecuniary / non-pecuniary interests.

Signature_____ Date:_____ Date:_____

Information submitted on this form, including any personal details will be a matter of public record and will be stored in the NSW Government records system. You can find out more about how the NSW Government handles the personal information it collects online by reading the Office of Environment and Heritage Privacy Management Plan. By submitting this form, you consent to the collection and use of your personal information in accordance with this plan.