**WALGA Selection Committee**

**Vacancy**

**WA LOCAL GOVERNMENT GRANTS COMMISSION**

**Member and Deputy Member (Metropolitan)**

**Member and Deputy Member (Country Rural (Shire))**

**Closing date: 5pm Friday, 5 April 2024**

**NOMINATION PROCESS**

Nominees are asked to complete the attached Nomination Form and email by **COB Friday 5 April 2024** to nominations@walga.asn.au Unsigned or late nominations will not be accepted. At the close of the nomination period the Selection Committee will meet and resolve on preferred candidates or make recommendations on preferred candidates to the WALGA State Council.

**IMPORTANT NOTE**

Please note, your nomination will be photocopied for the Association’s State Council and/or Selection Committee and where relevant, the Minister and Board Chairman. Therefore, it is important that profile information be complete, up to date and typed.

Appointments are conditional on the understanding that nominees will resign when their entitlement terminates, that is, they are no longer Elected Members or Serving Officers of Local Government.

**MINISTERIAL APPROVALS**

Ministerial approval for appointment requires name to be submitted to the Minister for each position. It is essential that a curriculum vitae, using the attached proforma, be submitted with your nomination form, no more than 2 pages.

**EQUALITY**

It should be noted that the Government is committed to providing equal selection opportunity for both indigenous and non-indigenous people and all genders and the W.A. Local Government Association encourages nominations accordingly.

**REASON FOR VACANCY, TERM AND COMMENCEMENT DATE**

Current term has expired. Term is for three years commencing the date of executive council approval and expiring August 2027.

**MEETING DETAILS**

Meetings: Generally monthly meetings with country travel involving up to 4-6 trips per annum of 3-5 days duration.

Venue: Department of Local Government, Sport and Cultural Industries, 140 William Street, Perth CBD

Duration: Normally half a day for meetings and 3-5 days for country travel.

Sitting Fee: $825 per day or $537 for a part day (under four hours).

Travelling allowance: Reimbursed for travel expenses as per State Government policy.

**ELIGIBILITY**

Country Rural Members – Open to Elected Members and Serving Officers from Shires outside Metropolitan Perth (country rural).

Metro Members – Open to Elected Members and Serving Officers from Metropolitan Local Governments

**SELECTION CRITERIA**

Nominee to address the following Selection Criteria:

• What is your relevant experience in Local Government? Please provide examples.

• What are your experiences, skills, attributes or qualifications to support the nomination? Please provide examples.

• Please outline your demonstrated interest in the position.

• Please outline your skills and experience in putting forward a position in a dynamic meeting environment and describe how you would fulfil the role representing the Local Government sector in this position?

**INTERVIEW COMPONENT**

Please note an interview may be requested as part of the selection process.

**ROLE**

The Commission’s primary role is to make recommendations to the Minister for Local Government with respect to the distribution of Commonwealth Financial Assistance Grants to Local Government in Western Australia.

**MEMBERSHIP**

* The Grants Commission consists of:
* Chairperson appointed by the Minister for Local Government;
* Department of Local Government, Sport and Cultural Industries representative (Deputy Chairperson); and
* Three WA Local Government Association Representatives.

**FOR FURTHER PARTICULARS ABOUT THE COMMITTEE PLEASE CALL**

Mrs Leah Horton

Manager Board Governance and Reporting

Department of Local Government, Sport and Cultural Industries

Tel: (08) 6552 1684 or email leah.horton@dlgsc.wa.gov.au

**FOR FURTHER PARTICULARS ABOUT THE NOMINATION PROCESS PLEASE CALL**

Chantelle O’Brien

Governance Support Officer

WA Local Government Association

(08) 9213 2013 or email nominations@walga.asn.au

Nominations must be submitted by the closing date to:

WA Local Government Association – Attention: Chantelle O’Brien

* Preferably by email to nominations@walga.asn.au; or
* by post to PO Box 1544 West Perth WA 6872

**Nick Sloan**

**Chief Executive Officer**

**NOMINATION FORM**

**Closing date: 5:00pm Friday, 5 April 2024**

**Local Government Grants Commission**

**1 Member and 1 Deputy Member (Metropolitan)**

**1 Member and Deputy Member (Country Rural (Shire))**

**Ministerial approval**

|  |  |
| --- | --- |
| Submission of Nomination | **Nominations must be submitted by the closing date to:** **WA Local Government Association - Attention: Chantelle O’Brien** * **by preferably email to** **nominations@walga.asn.au****; or**
* **by post to PO Box 1544, West Perth WA 6872.**
 |
| Nominee Title (e.g. Cr) |  |
| Last Name |  |
| Given Names |  |
| Council |  |
| Home address |  |
| Post Code |  |
| Email Address |  |
| Contact DetailsHome:Work:Mobile: |  |
| Occupation |  |
| Qualifications |  |
| Curriculum Vitae | **A curriculum vitae is required (1-2 pages only)**  |
| I hereby submit my nomination and declare that all information I have provided is true and correct. I also certify that my nomination is made in accordance with my Council’s policy on representation (where applicable). Should my nomination be successful, I will make every endeavour to commit the time and effort necessary to undertake this position, and will adhere to the eligibility criteria which specifies that should I no longer be a serving elected member or officer (whichever is applicable) in Local Government, I will resign from the Committee/Board as the Association’s representative.  |
|
| *Nominee:* | (Please sign or type name) | *Dated:* | (Please enter date) |
| **UNSIGNED OR LATE NOMINATIONS WILL NOT BE ACCEPTED****Canvassing of Selection Committee members and WALGA State Councillors will result in disqualification from the selection process.**It is preferred that you submit your completed nomination(s) by email. |

**MINISTERIAL APPROVALS**

Ministerial approvals for appointment require name to be submitted to the Minister for the position. It is essential that a curriculum vitae be submitted with your nomination form.

**PLEASE NOTE:**

Your nomination and supporting documentation is photocopied for State Council and where relevant, the Minister and Committee Chair. It is important that profile information be complete, up to date and typed.

**SELECTION CRITERIA:**

Please ensure you address each of the following selection criteria.

Details on how to address the selection criteria are attached to this nomination form.

**PLEASE COMMENT ON AND DEMONSTRATE YOUR CAPACITY TO MEET THE FOLLOWING SELECTION CRITERIA:**

• What is your relevant experience in Local Government? Please provide examples.

• What are your experiences, skills, attributes or qualifications to support the nomination? Please provide examples.

• Please outline your demonstrated interest in the position.

• Please outline your skills and experience in putting forward a position in a dynamic meeting environment and describe how you would fulfil the role representing the Local Government sector in this position?

***Please list the Boards/Committees on which you currently represent Local Government.***

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**Addressing Selection Criteria**

Selection of preferred candidates for vacancies on boards and committees is determined by the Association’s Selection Committee, which makes recommendations to State Council for ratification.

The selection process utilised in making recommendations is **merit-based.**

Integral to this process is the requirement to objectively assess and rate applicants on the basis of defined selection criteria for the vacancy. The applicant who rates the highest against the criteria will be the preferred candidate for the vacancy.

Selection criteria describe the qualifications, knowledge, skills, abilities, experience and interest a person requires in order to do a job effectively. The vacancy for which you are applying will include a variety of essential and desirable selection criteria which you must address in your application.

You must meet each of the essential criteria to be considered suitable for the vacancy. Whilst it is not necessary to satisfy the desirable criteria, where there are several candidates who meet the essential criteria, the Selection Committee will shortlist on the basis of the desirable criteria.

Many applicants are unsuccessful because they do not clearly address each selection criteria and assume that the Selection Committee will be able to ‘read between the lines’ in their application.

If you do not have sufficient space on the nomination form to address each of the selection criteria for the position, you may use a separate document. Make sure that you give the document an appropriate title (i.e. ‘Statement Addressing Selection Criteria’), and give each criteria a title using exactly the same wording as appears on the nomination form (i.e. ‘Relevant skills in the area’). List each criterion in the same order as they appear on the nomination form.

To make your selection criteria statement effective, it is recommended that you adhere to the following process:

(i) Ensure that you separately address each selection criteria.

(ii) Under each heading, write one or two short paragraphs explaining how you meet that particular criterion.

(iii) Each statement addressing a selection criterion needs to demonstrate your experience, skills, education, knowledge or interest which has equipped you to meet the requirements of the position.

Below are some suggestions as to what information to include in the statement you write for each selection criteria:

**• Highlight your relevant skills and experience by describing your major responsibilities through your position on Councils, in current or previous employment or through relevant non-paid work.**

Example

*During my 6 years on Council, I have developed skills which are relevant to the vacancy through my extensive involvement as a member on a range of Council committees, including X, Y and Z. Specific skills I have developed on these committees include …...*

**• Indicate the extent of your experience in relation to a particular criterion**

Example

*I have over three years’ experience as a member on the following Council committees – X, Y and Z. In addition, I was Chairman of X for two years and Deputy Chairman of Y for four years.*

**• Briefly give details of one or two specific things which you have done that are good examples of your ability to meet the criterion.**

Example

*My capacity to represent the interests of Local Government and the Association is demonstrated through my involvement as a member on the X board. During my time in this position, I demonstrated this capacity when an important issue came before the board for a decision which had particular relevance to Local Government. I liaised with the Policy Manager from the Association to be briefed on the ramifications of the issue, and at the next meeting of the board I was able to effectively argue for a period of consultation prior to making a final decision. The result was that the decision was deferred until the Association had completed a suitable period of consultation with member Local Governments.*

**• Where possible, indicate how successfully you meet the criterion. You could do this by referring to feedback you have received from others, or things that you have established which are still being used.**

Example

*The Committee which I chaired developed a report on XYZ which was subsequently endorsed by Council. The recommendations were adopted in full and the changes which eventuated are still in operation today.*

***• Mention any relevant qualifications and training you have, particularly if your experience is limited. This may include details of any relevant training courses you have attended or subjects studied.***

**Curriculum Vitae Pro forma**

The following information is required by the Department of the Premier and Cabinet from board member nominees. (For both new members and reappointed members.) A maximum of two pages for each member is preferred.

**Title**: Mr/Mrs/Ms/Miss/Mx/Dr/Prof….

**Full** **Name**:

**Postal** **Address**:

**Contact** **Telephone** **Number**:

**Email** **Address**:

**Current employer and position**:

• [List]

**Work history relevant to board position**:

• [List]

**Voluntary involvement relevant to board position**:

• [List]

**Qualifications/training**:

• [List]

**Other board experience (list all current positions)**:

• [List]

**Current contact details of two (2) referees**:

• [Referee 1] – must include name, job title (if applicable) and contact details

• [Referee 2] – must include name, job title (if applicable) and contact details

[This text to be deleted]

The following information is optional and provides us with important data on the diversity of our board membership across government and helps us assess how well we are achieving these outcomes.

Date of Birth dd/mm/yyyy

Aboriginal Yes / No

Torres Strait Islander Yes / No

Country of Birth – Australia Yes / No (If no, please specify)

Language other than English spoken at home Yes / No (If yes, please specify)

Person with a disability or special needs Yes / No (If yes, please specify)