**Expression of Interest for Appointed Position**

**SELECTION COMMITTEE**

This form should be used to apply for appointed positions on the Women’s Bowls NSW Selection Committee.

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| **First Name:** | | **Surname:** | |
| **Email Address:** | | **Contact Phone Number:** | |
| **Club:** | **District:** | | **National ID:** |

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| **Has the applicant ever received any disciplinary action by a club?**  **Yes**  **No** |
| **If yes, please provide relevant details:** |

Terms of Reference for each of the Committee can be found on:

<http://www.womensbowlsnsw.org/Members-Resources/Constitution-By-Laws>

**Duties carried out by the Selection Committee:**

1. Select Member Players to play in all interstate events
2. Provide selected players to the Board for approval. The Events and Teams Coordinator will notify the players.
3. Communicate regularly with BNSW with regards to the Junior Sides
4. Ensure team selections are transparent and made by evidence-based decisions as per the State Selection Policy
5. Work closely with the Women’s Bowls NSW office to organise all arrangements relating to travel and training camps for the State Side
6. Work closely with the State Side Managers

**Candidates must also meet the following criteria:**

1. Demonstrated proficiency and a good working knowledge of computers, (particularly Microsoft Office Suite or equivalent)
2. Proven ability to communicate at all levels – written and oral
3. Demonstrated ability to interpret, understand and implement rules and regulations, particular to individual committees
4. Proven ability to operate within a team environment
5. Commitment to professionalism and confidentiality
6. Disciplinary question above must be answered; however, this will not exclude applicant from attaining a position on the committee.

**By Executing this Expression of Interest, I agree:**

1. To abide by the Women’s Bowls NSW Confidentiality Agreement and Code of Ethics if selected
2. Failure to abide by Women’s Bowls NSW Confidentiality Agreement and Code of Ethics will result in my ineligibility for the position.

**Please complete the following questions:**

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| 1. Your Aims |
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| 1. Your Experience |
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| 1. Your ability relevant to the role |
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By signing below, I confirm all information is true and correct to the best of my knowledge.

|  |  |
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|  |  |
| Candidate Signature: | Date: |

**Nominations must be received by the CEO by close of business (4 pm) Wednesday 26 August 2020**

**By email:** [**ceo@womensbowlsnsw.org**](mailto:ceo@womensbowlsnsw.org)

**All Expressions of Interest received will receive a confirmation email within 24 business hours**