NSW GOVERNMENT

NSW Health

Applicant Registration No: _____
(Official use only)

# Expression of Interest Form

**Medicines, Poisons and Therapeutic Goods Act 2022 No 73**
**Regulatory Advisory Committee**

## INSTRUCTIONS

Please submit your completed EOI form **and** your current Curriculum Vitae (maximum of 5 pages) to the Ministry of Health via email to: NSWH-BoardAppointments@health.nsw.gov.au

## 1. CONTACT DETAILS

| Title | First Name | Middle Name/s |
|---|---|---|
| | | |

| Surname | Preferred name | Post Nom |
|---|---|---|
| | | |

| Contact Number | Alternative Number/s |
|---|---|
| | |

| Email | Date of Birth |
|---|---|
| | |

**Residential Address**

| | |
|---|---|
| Unit / street no / street | |
| Suburb | |
| State | Postcode |

**Postal Address (leave blank if same as residential address)**

| | |
|---|---|
| Unit / street no / street | |
| Suburb | |
| State | Postcode |

## 2. DEMOGRAPHICS

| Gender | ☐ Male | ☐ Non-binary/other |
|---|---|---|
| | ☐ Female | ☐ Choose not to answer |

| Do you identify as a member of any of these groups | Please select | People with disability / special needs |
|---|---|---|
| | Please select | Aboriginal and/or Torres Strait Islander |
| | Please select | Culturally and Linguistically Diverse (CALD) |

| Please indicate your ancestries if CALD | |
|---|---|

## 3. QUALIFICATIONS AND EXPERTISE

Please use the text box below to outline your formal qualifications (400 characters)

Are you a member of any other **NSW Government** boards or committees? ☐

If yes, please list

Are you a NSW Government employee? (includes NSW Health) ☐

If yes

the organisation name

your position title

## 4. REFEREES

Please provide the name and daytime contact number of 2 referees willing to support your application

1. Referee Name

Daytime contact number

Title/Position

2. Referee Name

Daytime contact number

Title/Position

## 5. QUALIFICATIONS AND EXPERTISE continued

Nominate the **single** area of expertise where you consider you can provide your most significant contribution

- ○ Medical
- ○ Dental
- ○ Nursing and midwifery
- ○ Veterinary practice
- ○ Industrial use of scheduled substances, including in primary industry
- ○ Pharmacology
- ○ Toxicology
- ○ The medicines manufacturing and distribution industries
- ○ The development of medicines and the regulation of scheduled substances, including their registration as therapeutic goods under the *Commonwealth Therapeutic Goods Act*
- ○ Assessing the risk of harm to humans, animals or the environment arising in connection with therapeutic goods
- ○ As a consumer of therapeutic goods

## 6. CHAIRPERSON

Please tick the box below if you wish to be considered for Committee Chairperson position now or in the future ?

☐

Please use the text box below to describe your skills and experience that demonstrate your capacity to provide leadership (1000 characters)

Please use the text box below to provide details of your skills and experience in your nominated area of expertise (3000 characters)

# Expression of Interest Form

**Medicines, Poisons and Therapeutic Goods Act 2022 No 73**

**Regulatory Advisory Committee**

## DECLARATION

I declare that:

I. I have never been, nor am I currently insolvent; and
II. I have not been disqualified from acting as a director or acting in the management of a company.

I grant permission for inquiries to be made to establish the accuracy of any of the information provided by me in this form and accompanying attachments and to determine my suitability for nomination and I understand that these inquiries will involve the disclosure of my information for these limited purposes. I understand that the Ministry of Health and selection panels may make these inquiries of any persons or organisations they consider appropriate.

By signing this declaration, I acknowledge that I will be required to grant permission for the conduct of probity checks, if I am shortlisted for appointment to the Medicines, Poisons and Therapeutic Goods Act 2022 No 73 Regulatory Advisory Committee, these checks will consist of:

- A national criminal record check Australia wide by the National Police Checking Service – CrimTrac
- A check of the Australian Securities and Investment Commission (ASIC) Register of persons prohibited/disqualified from managing corporations under the provisions of the Corporations Act 2001 (Cth)
- A check of the Insolvency and Trustee Service Australia (ITSA) National Personal Insolvency Index which contains information about proceedings and administrations under the Bankruptcy Act 1996.

I also consent to the Ministry's collection of the information (including any sensitive information such as racial or ethnic origin) as part of administering appointments to statutory authorities and advisory committees. This information may be included in submissions to Cabinet and shared with other public organisations.

**Privacy Notice under the *Privacy and Personal Information Protection Act 1998* ("the PPIP Act")**

The primary personal information and secondary personal information (see definitions below) in this form is being collected by the NSW Ministry of Health (contact details below) for the purpose of seeking approval for your appointment to a public sector board or committee, a Public/Statutory Office, or an Executive Agency Head.

For the purpose of seeking approval for your appointment, this information may be uploaded into the "GOView database", which is managed by The Cabinet Office.

If necessary for the purpose of seeking approval for the appointment, it may be provided to other public sector agencies. In providing the information in this form, you consent to it being disclosed to those persons or agencies for the purpose of determining your appointment nomination.

In the event that you are nominated or considered for a further or different board or committee in the future, you also consent to the use/disclosure of your personal information as above, for the purpose of seeking approval for that appointment.

# Expression of Interest Form

**Medicines, Poisons and Therapeutic Goods Act 2022 No 73**

**Regulatory Advisory Committee**

You are not required by law to provide the information in this form. However, if you choose not to provide the primary personal information, your appointment will not progress to the approval stage. Provision of the secondary personal information will not affect the consideration of your nomination (See definitions below).

In providing this information, you accept that your secondary personal information may be used for the purpose of reporting on diversity and inclusion practices and statistics across NSW Government boards and committees. Such reports may be provided to the Premier, Parliamentary Secretary, Ministers, or other NSW Government agencies. This is directed to supporting agencies and Ministers to consider diversity representation on boards and committees and look for opportunities to increase board and committee diversity. However, your name would not be included in any such statistical reporting.

In providing this information, if your appointment is successful, you consent to the use of your name and remuneration for the purpose of filling upcoming vacancies in NSW Government appointments when your term expires. You also consent to the publication of your name and remuneration on TCO's website list of current board and committee members and other NSW Government appointments.

You have the right to obtain access to your personal information under s. 14 of the PPIP Act. If the information held by a public sector agency is inaccurate, irrelevant, not up to date, incomplete, or misleading, you have the right to request that it be amended under s. 15 of the PPIP Act.

Primary personal information means:

- Full Name
- CV
- Suburb/postcode of residence
- Year of birth
- Email address
- Telephone number
- Mobile number.

Secondary personal information means:

- Gender
- Aboriginal and Torres Strait Islander status (ATSI)
- Culturally and Linguistically Diverse status (CALD)
- Person with a Disability (PWD).

Contacts:

NSW Ministry of Health

Corporate Governance & Risk Management Unit
Legal and Regulatory Services
NSW Ministry of Health
1 Reserve Road
St Leonards NSW 2065
Email: NSWH-BoardAppointments@health.nsw.gov.au

# Expression of Interest Form

**Medicines, Poisons and Therapeutic Goods Act 2022 No 73**

**Regulatory Advisory Committee**

| | |
|---|---|
| Print full name or E-Signature | |

| | |
|---|---|
| Date of Declaration: | |

**Submit your Expression of Interest with Curriculum Vitae of no more than 5 pages by email to:**

Email: NSWH-BoardAppointments@health.nsw.gov.au

Post: Attn: EOI Membership NSW Health Boards
Corporate Governance & Risk Management Unit
NSW Ministry of Health
LMB 2030 St Leonards NSW

| | |
|---|---|
| Where did you hear about the Expression of Interest? | Please select |

| |
|---|
| Answer if 'other' selected |