

Diamantina Shire Council

EXPRESSION OF INTEREST

Reconciliation Action Plan Working Group

Expression of Interest Reconciliation Action Plan Working Group

I would like to express my interest in being selected as a member of the Diamantina Shire Council Reconciliation Action Plan Working Group.

Surname:	First Name(s):
Residential Address:	
	Postcode:
	(Home)
Mobile: Emai	l:
Briefly outline why you would like to be on the Reco	onciliation Action Plan Working Group.
Detail your interest and/or involvement in local and networks	l/or broader aboriginal community affairs, advocacy and
3. What are the skills, attributes, knowledge and relevely Plan Working Group?	vant experience that you would contribute to the Reconciliation
	1 4 18 1 4 19 1 17 1 18 1 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ary 2022 at 9am via Zoom or at the Bedourie Office. Are you all Reconciliation Action Plan Working Group meetings and to
Signature:	Date:
17 Herbert Street, BEDOURIE QLD 4829	
■ 07 4746 1600 www.diamantina.qld.gov.au	☐ 07 4746 1272 ③ admin@diamantina.qld.gov.au
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