



**APPLICATION FOR THE INDIAN TRAIL  
Alcoholic Beverage Control Board**

**Personal Details:**

Title: \_\_\_\_\_

Surname: \_\_\_\_\_

Given Names: \_\_\_\_\_

**Contact Details:**

Business Hours Telephone: \_\_\_\_\_

After Hours Telephone: \_\_\_\_\_

Mobile Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Postal Address: \_\_\_\_\_

State: Post Code: \_\_\_\_\_

State of Residence: \_\_\_\_\_

## References

NOTE: Referees will only be contacted if you are selected for the final shortlist or interview.

Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Organization: \_\_\_\_\_

Business Hours Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Organization: \_\_\_\_\_

Business Hours Telephone: \_\_\_\_\_

## Other Information:

Qualifications \_\_\_\_\_

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Skills: \_\_\_\_\_

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Current Employment: \_\_\_\_\_

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Previous Employment: \_\_\_\_\_

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Positions held on other Federal or State Government bodies (i.e. Board memberships, Committees, council memberships, community groups)

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Positions held on all other types of bodies/organizations

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Other relevant experience

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## Statement

Please also attach a statement of three pages or less which addresses your suitability for appointment to the Indian Trail ABC Board.

It is suggested that your statement include references to your relevant expertise, leadership skills and experience, and your understanding of the roles, duties and governance obligations of members of the Board.

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**This application and the information provided on this application is public record and will be produced in response to a request for public records.**