**COMMUNITY GRANTS PROGRAM**

**Assessment Panel**

**Expression of Interest Form**

Please read the Community Grants Program Assessment Panel **Information Sheet** carefully before you complete this expression of interest (EOI) form. Contact the Office of Multicultural Interests (OMI) Grants Officer on 6552 1603 for further information or assistance.

Completed EOI forms and your current CV must be submitted by **4.00pm, Thursday 17 April 2025** to **grants@omi.wa.gov.au**

**Applicant contact information**

|  |  |  |  |
| --- | --- | --- | --- |
| Title (Mr / Mrs / Ms / other) : | Click here to enter text. | | |
| First name: | Click here to enter text. | | |
| Surname: | Click here to enter text. | | |
| Postal address: | Click here to enter text. | | |
| Suburb: | Click here to enter text. | Postcode: | Enter text. |
| Phone number: | Click here to enter text. | | |
| Email address: | Click here to enter text. | | |
| These details may be placed on the OMI database: | | **Yes**  **No** | |
| Note: Personal information collected by OMI is handled in accordance with the *Privacy Act 1988* | | | |

**Referee contact information**

Provide the details for one referee who you have worked with in the last five years.

|  |  |
| --- | --- |
| **Referee 1 Name:** | Click here to enter text. |
| Phone number: | Click here to enter text. |
| Email address: | Click here to enter text. |
| Relationship to you: | Click here to enter text. |

**Additional information**

|  |  |
| --- | --- |
| Have you attached a copy of your current CV? | **Yes**  **No** |
| OMI may call you for a short (15 minutes) phone interview to seek further information. | |
| Do you consent to being contacted by phone? | **Yes**  **No** |

**Professional and work history**

**Please provide a brief outline of your professional work history, focusing on your involvement in community engagement, project planning, events management or similar.**

Click here to enter text.

**Community involvement and experience**

**List the key positions you have held with culturally and linguistically diverse (CaLD) community associations or CaLD community activities you have been involved in over the past five years, starting with your most recent position or involvement.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates served** | **Organisation or Activity** | **Position or Role** | **Key responsibilities or activities undertaken** |
| Enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
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**Personal statement**

**Please provide a brief statement on why you would like to be on the community assessment panel.**

Click here to enter text.