LGPA Nomination Form 24/25



ABN: 14 189 764 852

Interested in nominating? Feel free to reach out to Joslin Colli to discuss on 0431 462 821 or president@planningwa.com

I wish to be part of the Local Governm [please tick as applicable] President Vice President Treasurer Secretary Committee Member Sub-Committee Member	ent Planners' Association Executive Committee 2023/24
Please send the completed Nominatio	n Form to info@planningwa.com
l,	consent to this nomination
Signature	Date
LGPA MEMBER CANDIDATE DETAILS	
Address	
Email	
Phone	
NOMINATED BY LGPA MEN	MBER
Note: if you are unable to provide a	nominator, the LGPA Executive can provide you with access to one.
I,	nominate
Nominator signature	Date

1. What experience do you have with Local Government Planning?
2. Why you would like to be in the position?
3. What qualities can you bring that makes you suitable for this position?
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