

**Expression of Interest Form  
Georges River Council  
Access and Inclusion Reference Group**

Thank you for your interest in being considered as a member of the Georges River Council Access and Inclusion Reference Group. This is an opportunity to work with Council on the implementation of the Disability Inclusion Action Plan and make Georges River Council a more inclusive and accessible place to live, work and visit. For further information on the reference group please see the draft terms of reference.

Name: .....

Phone: .....

Email: .....

Address: .....

Job title: *(if applicable)*.....

Organisation: *(if applicable)* .....

1. Please let us know if you have *(please tick as many as apply)*:

- A lived experience of disability
- A lived experience as a carer of a person with disability
- Skills and experience in working with people with disability

2. Do you live, work, study, or have links with the community in the Georges River Council area? In what way? *(150 words maximum)*

3. Please describe your relevant skills and experience in communicating and advocating on issues relevant to people with disability, their families and carers. *(150 words maximum)*

4. What do you consider are the major issues impacting people with disability, their families and carers in the Georges River Council area? What steps do you think Council could take to address these issues? *(150 words maximum)*

5. As a reference group member you would be required to attend a minimum of four meetings per year. Could you please let us know about any specific accessibility needs which would enable you to fully participate in the meetings? This could include a hearing loop, screen readable documents, vicinity to public transport, etc.

6. Are there any days and times that you would not be able to attend the reference group meetings? Do you have a preference in terms of days and times for the committee meetings?

.....  
Signature

.....  
Date

*For further information on the reference group please contact Council's Community Development Officer – Disability, Maria Athanasopoulos, on 9330 9455. Please submit your completed form via email to [Maria.Athanasopoulos@georgesriver.nsw.gov.au](mailto:Maria.Athanasopoulos@georgesriver.nsw.gov.au) or by post to PO Box 205, Hurstville BC NSW 1481(Attn: Maria Athanasopoulos).*