

(Please complete *ALL* sections)

NOMINEE DETAILS

Title					
Family name					
First name					
Preferred name					
Full Street Address (and postal address if different)					
Age		Date of birth		Gender	
Tel	Daytime		After hours		Mobile
Email address					

Iwi/hapū affiliations:

Relevant skills and attributes the candidate will bring to the position (e.g. Te Ao Māori perspectives – tikanga, mātauranga taiao, cultural practices; Treaty of Waitangi principles; familiarity with legislative and statutory processes, land and environmental management, policy development, consensus building – as relevant to the needs of the position):

Once completed, please send this form to: tepaewhakatere@doc.govt.nz, or post to
 Director-General, c/- Department of Conservation
 Attention: Te Pae Whakatere
 PO Box 10-420
 Wellington 6143

The closing date for nominations is 11 August 2020

Current or most recent employment (specify position and employer, include dates by year):

Blank response area for current or most recent employment details.

Qualifications and work experience (include significant work history or attach a CV):

Blank response area for qualifications and work experience details.

Are there any possible conflicts of interest which could arise if the nominee were appointed to the Options Development Group and what are they?

Blank response area for conflicts of interest details.

continued over...

NOMINATOR TO COMPLETE

Title			
Family name			
First name			
Preferred name			
Full postal address			
Email address			
Name of organisation endorsing nomination, if applicable			
Date		Signature of nominator	

NOMINEE TO COMPLETE

Have you read the information: <ul style="list-style-type: none">• Role Description – Options Development Group Member• Giving better effect to the Principles of the Treaty of Waitangi – a background paper on the process and main issues for the partial reviews of the general policies	Yes	No	
Do you have any health or mobility issues that will require departmental assistance in order for you to participate?	Yes	No	
Do you authorise the information provided by you on this form to be seen by those involved in the nomination /selection process?	Yes	No	
Do you agree to the information provided by you on this form and any accompanying information (in support of this nomination) being released to any person who requests it under the Official Information Act and/or Privacy Act?	Yes	No	
Do you authorise the Department of Conservation to keep this form on a confidential file after the nomination/selection process?	Yes	No	
Date		Signature of nominee	

NOTIFICATION OF RECEIPT OF NOMINATION (to be sent to nominee)

Name (of nominee): _____

Address (of nominee): _____

Receipt of your nomination for the Options Development Group is acknowledged on behalf of the Director-General, Department of Conservation. You should hear the outcome of your nomination by September 2020.

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