

NETBALL ACT DIRECTOR NOMINATION FORM

Full name of nominee*:			
Contact details:			
Address:			
Email:			
Phone:			
Nominators*:			
Nominator 1 – Name:			
Address:			
Nominator 2 – Name:			
Address:			
The office in which the nominee is	nominating cted Director		
Detail any potential conflict of in additional page if necessary.	iterest to you hol	ding a position on the Bo	ard of Netball ACT. Attach an
I understand that if elected as a Di agree to act honestly and diligently	rector of Netball A	ACT, I will be assuming a rar	• • •
SIGNED this	day of	2021	
Nominee Name		Nominator 1 Name:	
Signature		Signature	
		Nominator 2 Name:	
		Signature	

* Nomination will not be accepted without the signature of the nominee and the two nominators



APPENDIX A: BOARD SKILL MATRIX EVALUATION

To assist Netball ACT in maintaining a balanced and skills-based Board, please indicate your experience for each of the following statements utilising the following scale:

- 0. No experience at all;
- 1. Very limited experience;
- 2. Some experience and can contribute to discussion;
- 3. Good experience and can contribute and influence;
- 4. Strong experience and can lead in this area.

The matrix will be made available to members in addition to any supporting statement supplied by the candidate at time of nomination.

SKILL SET		EXPERIENCE					
I ha	ve:	0	1	2	3	4	
1.	Experience and knowledge in Marketing and Branding.						
2.	Experience and knowledge in Accounting and Finance.						
3.	High performance experience in our Sport.						
4.	A background and experience in Community sport and participation						
5.	Experience and knowledge in Governance.						
6.	Experience and knowledge in Legal.						
7.	Experience and knowledge in Communications and						
	Information Technology.						
8.	Experience and knowledge in Government and Public						
	Sector.						
9.	Experience and knowledge in Corporate and Private Sector.						
10.	Experience and knowledge in Research Techniques and Consumer Insights.						
11.	Experience and knowledge in Commercialisation of Assets						
	and Business Development.						
12.	Experience and knowledge in Risk Management						
13.	Experience and knowledge in Human Resources						
	Management.						
14.	Experience and knowledge in Facilities Management						



Please provide further information as to the reasons for your nomination (up to 200 words) below.

Netball ACT | ABN 85 800 220 698 SolarHub ACT Netball Centre, 435 Northbourne Ave Lyneham ACT 2602 PO Box 423 Dickson ACT 2602 | (02) 6241 4088 | <u>www.act.netball.com.au</u>