



Audit, Risk and Improvement Committee Nomination for Membership

Please submit your completed application, marked

“Confidential – Expressions of Interest – External Independent Member to the Uralla Shire Council Audit, Risk and Improvement Committee and Walcha Council Audit, Risk and Improvement Committee.

By email:

Applications close at 5:00pm AEDT on Thursday, 21 May 2026

NOMINEE DETAILS

Name		
Company Name		
ABN (if applicable)		
Address		
Postal Address <i>(if different from above)</i>		
Contact Numbers	Phone	Mobile
Email Address		

PROFESSIONAL EXPERIENCE

- Please provide details of your education and professional memberships.**

6. Please attach any other documentation in support of your application (e.g. your resume including references/referees)

DECLARATION

Please complete and sign:

I _____ acknowledge that the information provided on this Nomination Form is true and correct.

Date: / /2026