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| **Expressions of Interest form: PPSIG State Reps**  |
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| **Term:**  | 2 Years |
| **EOI Due:** | **COB Day 10 October 2018** to Melissa.wiggan@adea.com.au (Subject line: EOI\_PPSIG Facebook admin) |
| ***Criteria:***  | *The Private Practice Special Interest Group (PP SIG) needs state reps for NSW/ACT, SA and VIC.* *You will receive 5 CPD points towards your credentialling.**If you have any questions regarding this position, please contact Melissa via email* *melissa.wiggan@adea.com.au* |
| **Statement of Qualifications/ Experience** |  |
| **Submission:** | I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *<full name>*hereby submit an expressions of interest to <title>.Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Membership* No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Branch:\_\_\_\_\_\_\_\_\_ |
|  | □ I have read and agree to abide by the ADEA [Constitution](http://www.adea.com.au/about-us/our-organisation/constitution/) and [ByLaws](http://www.adea.com.au/about-us/our-organisation/by-laws/).□ I have read and agree to abide by the ADEA [Code of Conduct](http://www.adea.com.au/about-us/our-organisation/code-of-conduct/).□ I have read and agree to abide by the guidelines of the ADEA Diabetes Research Foundation. □ I have provided a statement of qualifications  |