Disability Access and Inclusion Advisory Group Nomination Form 2026

Form Preview

Contact Details

* indicates a required field

Applicant *

Title | First Name | Last Name

Address

Address

Phone Number *

Must be an Australian phone number.

Email Address *

Must be an email address.

Interest, Experience, and Capacity to Contribute

* indicates a required field

Why do you want to be part of the Disability Access and Inclusion Working Group? *

Word count:

Maximum 300 words

Which of the following best describes your experience with disability access and inclusion? *

☐ I have lived experience of disability
☐ I support or care for someone with disability
☐ I work or volunteer in access, inclusion or universal design
☐ I have relevant qualifications or training in access and inclusion
☐ Other:

Please describe your experience, community involvement, or advocacy work related to disability access and inclusion. *

Word count:
Maximum 300 words

Can you commit to attending bi-monthly meetings and contributing to advisory group activities? *
○ Yes
○ No

Do you currently live, work, or have a strong connection to the City of Bunbury? *
☐ I live in the City of Bunbury
☐ I work in the City of Bunbury
☐ I regularly access services or participate in community life in Bunbury
☐ Other:

Select all that apply

Do you have any access or support requirements that would help you participate fully in the Advisory Group? *
○ No, I do not have any specific requirements
○ Yes
e.g. Auslan interpreter, wheelchair access, accessible documents, support person, assistive technology

If you prefer to submit your nomination in an alternative format (e.g. video, audio), please upload it here.
Attach a file:

Note: If you choose this option, please respond to the questions above with “See attached.”

What access or support requirements would help you participate fully in the Advisory Group? *

e.g. Auslan interpreter, wheelchair access, accessible documents, support person, assistive technology

Declaration

* indicates a required field

I confirm the information contained in this nomination form is true and correct *
○ Yes