

NOMINATION FORM

HAWKESDALE COMMUNITY BENEFIT FUND COMMITTEE

Name:.....

Address:.....

Email:.....

Mobile:.....

Telephone:.....

Distance you
live from
Hawkesdale
township
(please tick)

<5km

6km–10km

11km–15km

16km–20km

>20km

Age (please
tick)

<20

20–39

40–59

60–79

>80

Connection to the local community

Please describe your connections to the community surrounding the Hawkesdale Wind Farm.

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5 **Relevant experience**

Please outline any experience you have had which you can draw upon in your work on the committee in regard to the formulation of selection criteria, evaluation of grant applications and making recommendations for the selection of the projects to be awarded.

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6 **Attributes/skills you will bring to the committee.**

Please list any other attributes or skills which underscore your suitability to serve on the Hawkesdale Community Benefit Fund Committee.

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7 **Other**

Please list any other information you would like to provide in support of your nomination to membership of the Committee (eg names of community referees who support your nomination, projects you have been involved in).

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Signature:

Date: