



# Carinya Home for the Aged

*A Caring, Sharing Community*

ABN: 59 613 202 819  
P: (07) 4091 2177 or (07) 4091 2599  
F: (07) 4091 2840  
E: [admin@carinyahome.org.au](mailto:admin@carinyahome.org.au)  
P.O. Box 522, Atherton Q. 4883

## EXPRESSION OF INTEREST FOR THE POSITION OF BOARD DIRECTOR

Name: _____	
Residential Address: _____ _____	
Postal Address: _____ _____	
Home Phone #: _____	
Mobile Phone #: _____	
Email Address: _____	
Specific Skills / Competencies (Please <u>circle</u> from the following as appropriate)	
Banking / Finance Building / Construction Health/ Medical O H & Safety Legal	Corporate Management Information Technology Small Business Aged Care Governance

Please detail or attach a summary of experience relevant to this role.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reasons for expressing an interest in the position of Board Director:

---

---

---

---

---

---

---

---

---

---

**Please Note:**

- As vacancies occur, the Board seeks membership from community members who have made an Expression of Interest.
- Your details may be held on our record for an extended period of up to twelve months.
- References may be requested to be provided.
- Contact from the Board Secretary will be made with you pending a vacancy where your experience and skills may be required, and you will have the opportunity to make a formal application for Board Membership.

**When making an Expression of Interest please complete this form and return via email to [admin@carinyahome.org.au](mailto:admin@carinyahome.org.au) with the subject “Attention Secretary of the Board”.**