

NOMINATION FORM

For the position of Elected Director on the
Leading Age Services Australia Ltd Board of Directors



PERSONAL AND CONTACT INFORMATION

Full Name of Nominee

Former name (if any)

Residential Address

Post Code

Telephone No.

Mobile Telephone No.

Email Address

Date of Birth

Place of Birth

ORGANISATION INFORMATION

Name of Member Organisation

Role

No of years/months in current role

DIRECTOR POSITION

Please tick the relevant category of Elected Director for this nomination:

- New South Wales/Australian Capital Territory Elected Director
- Western Australia Elected Director

Under Clause 28 of the LASA Constitution, these Director positions must be filled by a person who is an Officer of a Member which has at least 50% of their operations located in the relevant jurisdiction. Only nominees that meet this requirement for the relevant Director position are eligible.

The term of appointment for Elected Directors is three years.

STATEMENT OF SUITABILITY

Nominees are asked to make a brief statement in support of their nomination which details their suitability for the Director role on the Board of a national age care peak body (200 words or less)

NOMINEE CONSENT AND DECLARATION

I declare that the information I have provided in this Nomination Form for the position of Elected Director on the LASA Board is true and correct.

I consent to my nomination for a Director position on the LASA Board of Directors and I consent to act as a Director of LASA if appointed.

I declare that I am an Officer of a Member (who is a financial Member of LASA in the 2021/2022 year) which:

- Has at least 50% of its operations located in New South Wales and/or the Australian Capital Territory; or
- Has at least 50% of its operations located in Western Australia.

I declare that:

- I am not disqualified from managing a corporation, within the meaning of the Corporations Act 2001 (Corporations Act);
- I have not been disqualified by the Australian Charities and Not-for-profits Commission at any time during the preceding year from being a responsible person (a 'responsible entity' of a registered charity);
- I am not an undischarged bankrupt;
- I am not subject to a personal insolvency agreement or an arrangement under Part X of the Bankruptcy Act 1966 (Bankruptcy Act) that has not been fully complied with;
- I am not subject to a composition under Part X of the Bankruptcy Act and final payment has not been made; or
- I have not been convicted of offences such as fraud or offences under Corporations Act (e.g. a breach of duties as a director or insolvent trading).

By signing this declaration, I acknowledge that I grant permission for probity checks to be conducted, which may consist of:

- a check of the Australian Securities and Investment Commission Register of persons prohibited/disqualified under the provisions of the Corporations Act 2001;
- a check of the Australian Charities and Not-for-profits Commission Disqualified Persons Register; and
- a check of the Insolvency and Trustee Service Australia National Personal Insolvency Index which contains information about proceedings and administrations under the Bankruptcy Act.

Duly signed:

(Print Nominee Name)

(Signature)

(Date)

Privacy Statement: Please note that all personal information collected will be dealt with in accordance with the Australian Privacy Principles as set out in the Privacy Act 1988 (Commonwealth) and the Privacy Amendment (Private Sector) Act 2000 (Commonwealth) and in accordance with LASA's Privacy Policy. Further details about LASA's Privacy Policy may be found at www.lasa.asn.au

LODGEMENT OF NOMINATION

Nominees must sign and return this nomination form by **5.00pm on Friday 1 October 2021** to:

Company Secretary, Leading Age Services Australia
C/o Board Secretary, Alice Macklin: alicem@lasa.asn.au