[](https://u1975523.ct.sendgrid.net/wf/click?upn=F4Jmxw89yOaF-2FrUaIZqlX7js0r91xAvgi4fKuHA-2Bp-2Fov4yrYDfDZ1QJVcIha-2BQLC_xXpU6HnpH7tCUYLv7L0uJQxr4xtOZoEqI2g-2BJm7zhgkU4w-2F05mZDEwUxTTtdgyrArOmmcZvBML7j6JXvXNQZOeAJEhTkFdvzxPod1LsbaFDXshHMo0zzcOQFAuqwEW1e1Ths1A9rCrYkT9HLsW8zkGbA8tsqHg0YmdBcCgdTQS5kujJ0XIpPV7m7HgJ6r3a254kpJhMz-2BKCn-2B2vTENnd1w-3D-3D)

**CALL FOR EXPRESSIONS OF INTEREST FOR MEMBERSHIP TO:**

**EDUCATION AND PROFESSIONAL DEVELOPMENT COMMITTEE (EPDC)**

**CLOSING DATE 5 PM AEDT 20 November 2020**

|  |  |
| --- | --- |
| SECTION 1: Personal Details | |
| **Name: (title/Given Name/Surname):** |  |
| **Current Organisation:** |  |
| **Email Address:** |  |
| **Preferred Contact Phone Number:** |  |

|  |  |
| --- | --- |
| SECTION 2: Please indicate which role you would be interested in: | |
| **Committee:** | **Please indicate by (x) below :** |
| **Convenor** |  |
| **Committee Member** |  |

|  |
| --- |
| SECTION 3: Selection Criteria (please address relevant selection criteria in no more than 3 pages). |
| 1. **For Education and Professional Development Committee please address the following criteria:** 2. **More than five (5) years’ experience in the research management profession;** 3. **A track record in delivery of professional development programs. This could include as a Training Fellows or Case Study Assessor in the Society’s Accreditation program, the delivery of training and mentoring programs at a Chapter level, or the development of professional training in some other capacity outside the Society;** 4. **A willingness to commit at least two days per month to the activities of the Committee.** |

|  |  |  |  |
| --- | --- | --- | --- |
| SECTION 4: Referees | | | |
| **Please provide the name, telephone and email address of three people who are able to testify your skills and experience.** | | | |
| **Name** | **Position** | **Telephone/email** | **Relationship to Applicant** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| SECTION 5: Declaration by Nominee: |
| **I declare that the information contained in this EOI is true and correct at the time of submission.**  **Name:**  **Signature:**  **Date:** |

|  |
| --- |
| SECTION 5: Supervisor’s Declaration |
| **I understand that this role will require a minimum commitment of 2 days per month and I am willing to make available the needed time and resources.**  **Name:**  **Title:**  **Signature:**  **Date:** |
|  |