PAPUA NEW GUINEA FEDERATION QUEENSLAND INC.
PO Box 5019 DAISY HILL QLD, 4127

ABN: 64 998 658 752
Incorporation No.: IA 4071111

SUB-COMMITTEE APPLICATION FORM

Thank you for making the decision to volunteer your time to provide assistance to the Papua New Guinea Federation (PNGFQI) committee. Please complete, sign and lodge this **Sub-committee Application Form** either in person or via email to Secretary secretary@pngfqi.org. We will endeavour to respond to your application within 10 days.

APPLICANT CONTACT DETAILS

Title: ☐ Mr. | ☐ Mrs. | ☐ Miss. | ☐ Ms.

First Name: _____ Last Name: _____

Email: _____ Mobile Number: _____

WHICH SUB-COMMITTEE/S ARE YOU APPLYING FOR

Please indicate the sub-committee/s you wish to be considered for, by numbering the squares below, with ***1*** being the sub-committee you are most interested in, and going up in order. You do not have to put a number in every square.

☐ **Community engagement** ☐ **PR & Social Media** ☐ **Events**

☐ **Projects** ☐ **Youth and Sports**

ABOUT YOU

Please provide some context on the value and experience you would bring to the PNGFQI Sub-committee.

YUMI WAN KANTRIWE ARE ONE COUNTRYHANUA TAMONA

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EMERGENCY CONTACT DETAILS

In the event of any emergency while the volunteer is providing services, the following contact should be notified immediately.

Emergency Contact Name: _____

Emergency Contact Phone No.: _____

APPLICANT AGREEMENT

By signing this form, I agree to support my assigned sub-committee leader (i.e. the PNGFQI elected committee member) by participating in sub-committee meetings either in person or by teleconference. I undertake that I am fully prepared for each meeting by completing background reading and tasks requested.

I will endeavour to participate in additional sub-committee activities as required outside of scheduled meetings.

I understand that I am engaged in supporting the goals of the committee on a voluntary basis and do not expect to be paid wages for my time and service.

I understand that I am not employed by PNGFQI and will not receive any employee benefits including pay or workman compensation.

I agree to indemnify and hold PNGFQI harmless against any damage related to my sub-committee activity, and that PNGFQI shall hold me harmless against any damages related to my sub-committee activity.

Signature: _____ Date: _____

APPROVAL BY PNGFQI COMMITTEE

I endorse this application and support the member to join and participate in the sub-committee for:

_____

Name: _____

Position: _____

Signature: _____ Date: _____

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