



Expression of Interest

Committee: _____

Position: Chair Member

Name: _____

Member ID: _____

Email: _____

Contact phone: _____

Please outline your interest and fit for this position (300 words max.):

Please note any Conflicts of interest:

Please professional/clinical areas of interest:

I have enclosed/attached a copy of my curriculum vitae (expressions of interest without this form, a curriculum vitae or an EOI statement will not be considered)