

Application for Membership

Northern Coastal Management Program Advisory Committee

Applications are being sought for a member of Shoalhaven City Council's Northern Coastal Management Program Advisory Committee.

Purpose of the Committee:

The principal objective of the Northern Coastal Management Program Advisory Committee is to assist Shoalhaven City Council in the development and implementation of one or more Coastal Management Program for the northern area of the Council. This will need to be in accordance with the NSW Coastal Management Manual. The north area applies to the following coastal areas and estuaries:

- All Council managed beaches from Seven Mile / Berry Beach to the most northern coastal boundary of the Shoalhaven LGA, to the southern end of Warrain / Currarong Beach.
- Shoalhaven River Estuary
- Broughton Creek
- Crookhaven River/Curleys Bay
- Lake Wollumboola
- Shoalhaven Urban and Rural estuaries

Role of the Committee

- a) To assist the Council in the development and implementation of the CMPs for the areas relevant to 'Purpose' (see above).
- b) To assist the Council monitoring and assessing the effectiveness of the CMPs during and after their implementation.
- c) To assist the Council by providing input into known coastal event(s) and erosion behaviour; and
- d) Facilitate broader community consultation and participation in coast and estuary management through informing and liaising with member community groups.

Shoalhaven City Council encourages applications from Aboriginal community members.

The Committees will meet as required, normally during business hours, at the Nowra Administration Building or via online.

1. Details of Applicant					
Mr / Mrs / Miss / Ms / Dr					
Surname:					
Given Name:					
Email*:					
Postal Address:					
Phone: (H)	(M)	(B)			
Do you identify as aboriginal? 🛛 Yes 🛛 No					
*Correspondence with Committee Memb	bers will be sent via em	nail unless otherwise advised.			

2. Why are you interested in coastal and estuary management in the Shoalhaven?

3. Attributes

Please Circle One

Do you like to share ideas with other people?	Yes		No	
Do you respect people who have a different opinion or view than yours?	Yes		No	
Do you accept compromise?	Yes		No	
Are you interested in working in partnership with Government Agencies, technical experts and Council?	Yes		No	
4. Are you a member of an existing:	Please Circle One		Name of Group or Body / Details	
Community Consultative Body?	Yes	No		
User Group (i.e. Fishing Club, Boating Club etc.)?	Yes	No		
Conservation Group (i.e. Bushcare, Landcare, Dunecare Group etc.)?	Yes	No		
Primary Production Industry Group (such as oyster grower groups, commercial fishing groups, etc.)?	Yes	No		
Chamber of Commerce or other Community or Business group?	Yes	No		

5. What local knowledge or experience do you have of coastal and estuary management in the Shoalhaven?						
	-					
6. Why do you want to join the Commi	ittee?					
7. Will you be available from 4pm to 6pm on weekdays to attend meetings?	Please Circle One					
	Yes	No				
8. How will you ensure the views you l	bring to the co	mmittee reflect	your community's views?			

Please complete the above form and return by post to *The Chief Executive Officer, Shoalhaven City Council, PO Box 42, NOWRA NSW 2541* or email it to <u>council@shoalhaven.nsw.gov.au</u> Attachments of further information supporting your application are permitted.

Privacy Notification: Shoalhaven City Council is collecting the information on this Contact Details Form / Membership Application form in order to ensure correct contact information for the distribution of relevant information in relation to your role on the Committee (should you be successful). Contact information collected will be used solely by Council staff for the stated purpose. Individuals may apply for access to, or correction of, their personal information at any time.