

# Application Form - Community Participation Register

Part of our vision at Grampians Health is to learn about the views of our local and diverse community through representation across the health service. Community members can be involved in local reference groups, the overarching Community Advisory Committee or by assisting with the co-design of service development and improvements.

There are a variety of ways that you can be involved. If you are interested in finding out more, please complete and return this application form to the details listed below. We look forward to hearing from you and working with you.

**Name:**

Preferred title: Ms  Mrs  Mr  Other  .....

**Family name** ..... **First name/s** .....

**Age** 16-19 years  19-25 years  26-35 years  36-45 years   
46-55 years  56-65 years  66 years and over

**Postal address:**

.....  
.....

**Phone:** Home: ..... Work: .....  
Mobile: .....

**Email:** .....

**To ensure that we meet the needs of specific projects, do you identify with any of the following groups?**

Aboriginal and Torres Strait Islander Descent  LGBTIQ  Migrant Background

Living with a Disability  Living with a Chronic Illness  Living with Dementia

Rural and Remote Living  Living in Social Isolation  Other .....

I will require the services of an interpreter: Yes / No (*please circle response*)

Please specify language .....

**My interests in health include:**

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**I am a member of the following Community Associations / Community Interest Groups / Local Recreational or Support Groups** *(please list them all):*

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**Please briefly provide details of your personal skills, job skills and expertise below:**

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<b>Interest in joining a formal committee or reference group</b>			
I am interested in being on the Community Advisory Committee	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
I am interested in being on my local Community Reference Group: Ballarat / Dimboola / Edenhope / Horsham / Stawell <i>(please circle)</i>	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
I am interested in being the chairperson of the committee / group	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
<b>Interest in providing feedback</b>			
I am interested in being involved in focus groups / discussion groups	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
I am interested in sharing my view via email	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
I am interested in reviewing health service information such as information brochures and leaflets	<input type="checkbox"/>	Yes	<input type="checkbox"/> No
<b>Availability</b>			
I am available at the following times	<input type="checkbox"/>	Business Hours	<input type="checkbox"/> Weekends
	<input type="checkbox"/>	Evenings	
<b>Preferred method of contact</b>			
I would prefer to be contacted by:	<input type="checkbox"/>	Phone	<input type="checkbox"/> SMS
	<input type="checkbox"/>	Email	
The best way to send me information to read is by:	<input type="checkbox"/>	Email	<input type="checkbox"/> Mail

Please return the completed form to Ben Kelly, Executive Director Acute Operations - Ballarat via email: [ben.kelly@bhs.org.au](mailto:ben.kelly@bhs.org.au) or post: PO Box 577, Ballarat VIC 3353.

**Note:** Individuals who are employed by or represent Grampians Health are not eligible for membership to the Community Reference Groups or the Community Advisory Committee.