

## Expression of Interest for Appointment as a Member of the Mental Health Tribunal Western Australia

### Personal and Professional Details

Full Name

Address

  
  
  

Telephone

Email

Please indicate your gender identity:  Male  Female  Other

Do you identify with any ethnic/cultural/language group?  Yes  No

If yes, please identify:

Do you speak any language other than English?  Yes  No

If yes, please identify:

Are you currently a full-time or part-time WA Public Sector employee? **Note: Members who intend to remain concurrent full-time WA Public Sector employees may not be eligible for remuneration.**

Full-time  Part-time  Neither

If yes, please provide details of your current employment and whether you intend to retain your current employment.



Are you an Australian citizen or permanent resident?

Yes

No

If no, please detail below your authorisation to work in Australia and **attach evidence**.

## Position Sought

### Member Status

Member (full-time)

Member (part-time – one, two, three, or four full days per week available)

Number of full days per week sought:

Preferred working days:  Monday  Tuesday  Wednesday  Thursday  Friday

Sessional Member (full days on an irregular as needed basis) - **Psychiatrist Members only**.

### Member Type

Legal Member – An Australian lawyer as defined in s3 *Legal Profession Act 2008* (WA)

Child and Adolescent Psychiatrist Member – A Fellow of the Royal Australian and New Zealand College of Psychiatrists with additional qualifications and clinical training in the treatment of mental illness in children

Psychiatrist Member – A Fellow of the Royal Australian and New Zealand College of Psychiatrists

Community Member – A member who is not a lawyer, a medical practitioner, or a mental health practitioner who is currently a staff member of a mental health service or private psychiatric hostel.

## Qualifications

### Legal Members

Have you been admitted to the legal profession under the law of Western Australia or the law of any State or Territory of the Commonwealth of Australia?

Yes

No

If yes, please specify the date you were first admitted to the legal profession and the Australian jurisdiction. **Please attach a copy of your most recent practice certificate or other evidence of admission.**

Date of admission:

State or Territory:



Have you been admitted to the legal profession or enrolled as a legal practitioner in any other jurisdictions (Australian or otherwise)? If yes, specify all jurisdictions and dates of admission or enrolment.

Date of admission: State/Territory/Country:

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### Psychiatrist Members

Are you a Fellow of the Royal Australian and New Zealand College of Psychiatrists?

Yes  No

If yes, please specify the date you were first admitted to Fellowship of RANZCP. **Please attach evidence of admission.** Date of admission:

Have you completed the RANZCP Certificate of Advanced Training in Child and Adolescent Psychiatry? **Note: this is not a statutory requirement for appointment as a Psychiatrist Member.**

Yes  No

Are you an Accredited Member of the RANZCP Faculty of Child and Adolescent Psychiatry? **Note: this is not a statutory requirement for appointment as a Psychiatrist Member.**

Yes  No

Have you completed some other formal qualification and clinical training in the treatment of mental illness in children? **Note: this is not a statutory requirement for appointment as a Psychiatrist Member.** If yes, detail below.



## Community Members

Have you been admitted to the legal profession under the law of Western Australia or the law of any State or Territory of the Commonwealth of Australia? **Note: you are not eligible to be appointed as a Community Member if the answer is yes.**

Yes  No

Are you a medical practitioner (*medical practitioner* means a person registered under the *Health Practitioner Regulation National Law* in the medical profession)? **Note: you are not eligible to be appointed as a Community Member if the answer is yes.**

Yes  No

Are you a mental health practitioner who is currently a staff member of a mental health service or private psychiatric hostel? **Note: you are not eligible to be appointed as a Community Member if the answer is yes.**

Yes  No

## Further Information

### Curriculum Vitae

You must submit your curriculum vitae of no more than 4 single-sided A4 pages (additional pages will not be accepted) with this completed form. Your curriculum vitae must include:

- A summary of your further and higher education qualifications (including institution/s attended and date/s qualification/s obtained); and
- A summary of your employment history.

### Covering Letter

You must submit a covering letter of no more than 2 single-sided A4 pages (additional pages will not be accepted) indicating why you are interested in serving as a Member of the Tribunal and how your skills and experience will make you a good fit to perform the required work in the context of the Work Related Requirements identified in the Position Description.

**Please make sure you have completed all sections of this document**

## Declaration

I declare that the information that I have given on this form and in supporting documentation is true to the best of my knowledge and belief and I certify that the typed or electronic signature below is intended to be my signature.

I have read, and agree to participation in, the Appointment Process as described in the Position Description. I understand that this may involve conducting reference checks from persons who I have not specifically nominated as a referee, and I consent to this.

Signature of applicant

Date

