

Nomination Form for Gateway Reviewers

Title:	First name:	Last name:	
Organisation:			
Position:			
Public sector: Yes <input type="radio"/> No <input type="radio"/>		Private sector: Yes <input type="radio"/> No <input type="radio"/>	
ABN:		Daily rate (inc. GST) \$	
Postal Address:			
City	Country	State	Post Code
Street Address: As above <input type="radio"/>			
City	Country	State	Post Code
Office phone		Mobile	
Email address:			
Accreditation/Training: Review Team Member <input type="radio"/> Review Team Leader <input type="radio"/>			

Industry/Sector Experience - Please check all relevant options		
<input type="radio"/> Accounting	<input type="radio"/> Emergency Services/ Law Enforcement	<input type="radio"/> Logistics
<input type="radio"/> Agriculture		<input type="radio"/> Manufacturing
<input type="radio"/> Architecture/Design	<input type="radio"/> Engineering	<input type="radio"/> Mining Resources
<input type="radio"/> Arts/Entertainment	<input type="radio"/> Government	<input type="radio"/> Science & Technology
<input type="radio"/> Audit	<input type="radio"/> Health/Medical	<input type="radio"/> Telecommunications
<input type="radio"/> Banking/Finance	<input type="radio"/> ICT	<input type="radio"/> Town Planning
<input type="radio"/> Construction	<input type="radio"/> Insurance	<input type="radio"/> Transport/Rail
<input type="radio"/> Economics	<input type="radio"/> Legal	<input type="radio"/> Utilities
<input type="radio"/> Education/Training	<input type="radio"/> Local Authority	<input type="radio"/> Water

Skills and Strengths - Please check all relevant options		
<input type="radio"/> Business Case Development	<input type="radio"/> ICT	<input type="radio"/> Quality Assurance
<input type="radio"/> Business Change Management	<input type="radio"/> Industrial Relations	<input type="radio"/> Quantity Surveying
<input type="radio"/> Business Strategy Development	<input type="radio"/> Logistics	<input type="radio"/> Records Management
<input type="radio"/> Communications/Marketing	<input type="radio"/> Network/Systems	<input type="radio"/> Research
<input type="radio"/> Community/Stakeholder Consultation	<input type="radio"/> Operations	<input type="radio"/> Risk Management
<input type="radio"/> Contract Management	<input type="radio"/> Policy	<input type="radio"/> Safety Management
<input type="radio"/> Corporate Planning	<input type="radio"/> Procurement	<input type="radio"/> Service Delivery
<input type="radio"/> Customer Service	<input type="radio"/> Program/Project Management	<input type="radio"/> Tender Evaluation
<input type="radio"/> Human Resource Management	<input type="radio"/> Property Development/Management	

If you possess prior Gateway Review experience, please provide further details below, including information such as: jurisdiction, project, year etc.

Information provided in this form can be shared with the Commonwealth and other State Agencies Gateway Units*. Yes No

By signing or typing my name below I certify that the information submitted in this application is true and correct to the best of my knowledge.

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Signed (Note: If you do not have an e-signature you may type your name) Date:(dd/mm/yy)

- Please email the completed nomination form, together with your curriculum vitae (no more than five pages) and training certificate, to gatewayreviews@treasury.qld.gov.au

** Queensland Treasury is collecting the information on this form for the purpose of registering you as a Gateway Reviewer in Queensland. Queensland Treasury usually gives some of or all this information to other Queensland Government agencies (including departments, Government Owned Corporations and statutory bodies) who have requested Queensland Treasury to coordinate a Gateway Review on their behalf. Your personal information will not be disclosed to any other third party without your consent.*