## **Nomination Form for Gateway Reviewers**

Title: First name:	Last name:				
Organisation:					
Position:					
Public sector: Yes No Private sector: Yes No					
ABN: Daily rate (inc. GST) \$					
Postal Address:					
,	Country	State Post (		Post Code	
Street Address: As above					
,	Country	State	Post Code		
Office phone Mobile					
Email address:					
Accreditation/Training: Review Team Member Review Team Leader					
Industry/Sector Experience - Please	check all relevant options	5			
O Accounting	O Emergency Services/ Law Enforcement		O Logistics		
O Agriculture			O Manufacturing		
O Architecture/Design	O Engineering		O Mining Resources		
O Arts/Entertainment	O Government		O Science & Technology		
O Audit	O Health/Medical		O Telecommunications		
O Banking/Finance	O ICT		O Town Planning		
O Construction	O Insurance		O Transport/Rail		
O Economics	O Legal	O Legal		O Utilities	
O Education/Training	O Local Authority		O Water		
Skills and Strengths - Please check all relevant options					
O Business Case Development	O ICT		O Quality Assurance		
O Business Change Management	O Industrial Relations		O Quantity Surveying		
O Business Strategy Development	O Logistics		O Records Management		
O Communications/Marketing	O Network/Systems		O Research		
O Community/Stakeholder Consultation	O Operations		O Risk Management		
O Contract Management	O Policy	O Policy		O Safety Management	
O Corporate Planning	O Procurement		O Service Delivery		
O Customer Service	O Program/Project Ma	O Program/Project Management		O Tender Evaluation	
O Human Resource Management	O 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*.				
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.				
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 <a href="mailto:gatewayreviews@treasury.qld.gov.au">gatewayreviews@treasury.qld.gov.au</a>

Queensland Treasury is collecting your personal information for the purpose of registering you as a Gateway Reviewer in Queensland. This information may be disclosed 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 otherwise be disclosed to any other third party without your consent unless authorised or required by law. If the personal information is not collected, we will be unable to register you as a Gateway Reviewer. Our privacy policy has further details about how you can access or amend the personal information we hold about you, and how you can make a privacy complaint if you believe we have not handled your personal information in accordance with the Information Privacy Act 2009. You can also contact Queensland Treasury's Privacy Team if you have any questions.