# 2024-2025 consumer and community representative nomination form for participation in Targeted Calls for Research peer review panels

All questions in this form are required except for question 8, which is optional.

Personal details

|  |  |
| --- | --- |
| 1. Title |  |
| 1. First name |  |
| 1. Surname |  |
| 1. Phone |  |
| 1. Email |  |
| 1. Organisation/ institution/ position (if applicable) |  |
| 1. State/ territory |  |
| 1. Gender[[1]](#footnote-1) (optional) |  |
| 1. Languages spoken |  |
| 1. Do you require any supports to be an effective representative? | No  Yes  Large-print material  Interpreters  Easy read materials  A support person |

Experience and qualifications

1. Outline the consumer/ patient / carer/ community representative perspective you possess.
2. Describe any previous experience and knowledge that would support you in performing the roles and responsibilities of a consumer and community representative. For example:
   * any personal or professional experience with a health service, health research or other health-related fields, either as a consumer, carer or provider
   * any previous experience as a consumer or community advocate.
3. Provide any other information you feel is relevant for example professional qualifications, work history or other experience related to health consumer issues.

Please send completed forms to [targeted.research@nhmrc.gov.au](mailto:targeted.research@nhmrc.gov.au)

1. Gender information will assist NHMRC in meeting the Australian Government’s commitment to gender diversity. [↑](#footnote-ref-1)