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**National Centre of Research Excellence  
for Preventing and Countering Violent Extremism**

**Governance Board – Expression of Interest**

## *Deadline for submission: tbd*

This form should be completed and submitted to the Department of the Prime Minister and Cabinet (DPMC) by email to [HWT@dpmc.govt.nz](mailto:HWT@dpmc.govt.nz).

# Personal and Contact Information

|  |  |
| --- | --- |
| Full name |  |
| Preferred name |  |
| Title |  |
| Nationality *(if not NZ)* |  |
| Email address |  |
| Phone number(s) |  |
| Postal address |  |

# Skills and Experience

|  |  |
| --- | --- |
| Current or most recent employment  *(position and employer, including years)* | *Current*  *Most recent* |
| Government board appointments held  *(if any)*  *(include dates)* | *Current*  *Previous* |
| Private and/or voluntary sector board appointments held  (include dates) | *Current*  *Previous* |

Governance Board members shall have demonstrated strengths in one or more of the following areas, detailed in Annex A of the draft Board Terms of Reference available on the DPMC website:

* Leadership
* Governance
* Tangata whenua and tangata tiriti partnership
* Strategic thinking
* Financial acumen
* Diversity
* Community linkages
* Subject matter expertise
* Research expertise

Please provide evidence of your skills and experience in one or more of these areas, and outline how these would benefit the Board and the He Whenua Taurikura Centre.

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|  |

Please outline any other qualifications, skills and experience that you have (e.g. business skills, community awareness, regional perspectives, or other specific attributes) that are of relevance to your membership of this Board.

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# Declarations

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| --- | --- | --- |
| Possible conflicts of interest (see the Auditor General’s guidance on Conflicts of Interest at <https://oag.parliament.nz/2020/conflicts>) | *Interests (if any)*  *Proposals for conflict management (if applicable)* | |
| Have you ever been convicted of any offence in New Zealand or in any other country (other than minor traffic or parking offences; any previous convictions that meet the criteria of the Criminal Records (Clean Slate) Act 2004 do not need to be disclosed)  Are there any charges against you yet to be heard? | | Yes / No  Yes / No |
| Have you been the subject of any disciplinary action by any professional body in New Zealand or overseas?  Have you ever been made bankrupt, entered into a composition with creditors, or been disqualified as a director? | | Yes / No  Yes / No |

# Diversity Information

Board membership should, to the extent possible given its size, have a distribution of ages, ethnicities, genders, faith and religious backgrounds, geographies, educational achievements and experiences.

|  |  |
| --- | --- |
| What age range applies to you? | *[ ] Under 30*  *[ ] 30-39*  *[ ] 40-49*  *[ ] 50-59*  *[ ] 60 and over*  *[ ] Prefer not to say* |
| Which ethnic group(s) do you identify with? | *[ ] New Zealand European/Pākehā*  *[ ] Māori*  *[ ] Samoan*  *[ ] Tongan*  *[ ] Cook Islands Māori*  *[ ] Indian*  *[ ] Niuean*  *[ ] Chinese*  *[ ] Other, e.g. Dutch, Japanese, Tokelauan. Please state: \_\_\_\_\_\_\_\_\_\_\_\_\_*  *[ ] Prefer not to say* |
| Which gender group do you identify with? | *[  ] Female*  *[  ] Male*  *[  ] Gender diverse*  *[  ] Prefer not to say* |
| Religious affiliation  *(if any)* | *[ ] Please state: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *[ ] No religion*  *[ ] Prefer not to say* |
| Highest level of educational achievement | *[ ] Secondary school qualification*  *[ ] Level 5 or 6 diploma*  *[ ] Bachelor degree or Level 7 qualification*  *[ ] Post-graduate or honours degree*  *[ ] Masters degree*  *[ ] Doctorate degree*  *[ ] Prefer not to say* |

# Referees

Please provide the details of two people not related to you who know you well and who can vouch for your character, ability and the accuracy of your application. Ideally at least one should be a current/former chair or manager.

|  |  |
| --- | --- |
| Full name |  |
| Phone number(s) |  |
| Email address |  |

|  |  |
| --- | --- |
| Full name |  |
| Phone number(s) |  |
| Email address |  |

# Declaration

*By submitting this application, I declare that the information I have is, to the best of my knowledge and belief, true and complete.*

|  |  |  |
| --- | --- | --- |
| Signature: |  | Date: |