

## LODDON HEALTHY MINDS NETWORK

Promoting and advocating for improved wellbeing and access to appropriate services for people in the Loddon Shire affected by mental health issues.

<http://loddonhealthyminds.com.au>

# EXPRESSION OF INTEREST

## LODDON HEALTHY MINDS NETWORK COMMUNITY REPRESENTATIVE

### Your Details

Name:

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Address:

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Town:

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Postcode:

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Telephone  
Number:

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Mobile:

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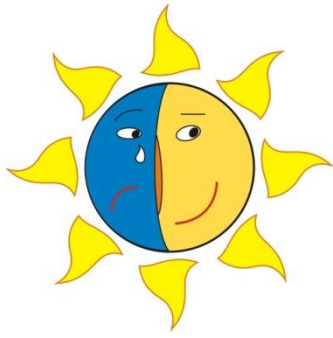
Email:

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**The Loddon Healthy Minds Network promotes and advocates for improved wellbeing and access to appropriate services for people in Loddon Shire affected by mental health issues.**

We are interested in your experiences and skills that would enable you to contribute to the Network's vision.





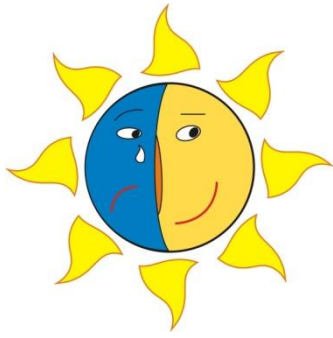
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What experience do you have in networking or developing links with the general community?

Do you have any other experiences or skills that may be relevant?



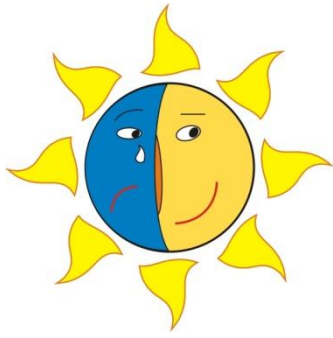
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In your opinion, what are the key skills needed to be an effective community representative on the Loddon Healthy Minds Network?

What are your 3 major reasons for wanting to become a community representative on the Loddon Healthy Minds Network?



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Please provide contact details of two referees:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Submission of Expression of Interest

All expressions of interest should be marked "Confidential" to:

Wendy Gladman  
Director Community Wellbeing  
PO Box 21  
WEDDERBURN VIC 3518

or emailed to:

[healthyminds@loddon.vic.gov.au](mailto:healthyminds@loddon.vic.gov.au) (all email applications will be acknowledged as received).

