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| **CABINET-IN-CONFIDENCE** | CABINET OFFICE USE |
| [**CABINET APPOINTMENT SUMMARY SHEET**](file:///C%3A%5CUsers%5CTemplates%5CCabinet%5CCabinet%20Appointment%20Summary.dot) | SUBMISSION NO. |
|  |  |  |
| TITLE OF BOARD OR COMMITTEE |
| **ENTER TITLE OF BOARD (correct legal name)** |
| MINISTER RESPONSIBLE |
| **ENTER HON MINISTER'S NAME MLA/MLC, RELEVANT PORTFOLIO** |

PROPOSED APPOINTEE(S)

|  |  |  |  |
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| TITLE | FULL NAME | ELIGIBLE FOR REMUNERATION(EXTERNAL) | TERM OF APPOINTMENT |
| Commencing | Expiring |
|  |  |  |  |  |
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| RELEVANT ACT OR AUTHORITY (see Cabinet Handbook) UNDER WHICH BOARD MEMBERS ARE APPOINTED      |
| TIER CLASSIFICATION (see Premier’s Circular 2023/02 – State Government Boards and Committees) A [ ]  B [ ]  C [ ]  D [ ]  |
| COMPOSITION OF BOARD IF CABINET APPROVES THE PROPOSED APPOINTMENT/S: |
| Total number of positions on board |    |  | Number of women |    |  |
| Total number of positions filled |    |  | Number of men |    |  |
|  |  |  |  |  |  |
| Is Executive Council approval required? | Yes [ ]  | No [ ]  |
| Has the OnBoardWA Register been consulted? | Yes [ ]  | No [ ]  |
| Is this submission:Establishing a Board Yes [ ]  No [ ] Appointing Board Members Yes [ ]  No [ ]   | Abolishing a Board Yes [ ]  No [ ]   |
| REMUNERATION RECEIVED (As recommended by PSC, if applicable)Chairperson $Amount per meeting/per annum, half/full day etc.Members $Amount per meeting/per annum, half/full day etc. |
| OTHER ALLOWANCES PAYABLETravel Reimbursement Yes [ ]  No [ ]  |
| CREATION DATE OF BOARD dd/mm/yyyyTENURE OF BOARD Ongoing Yes [ ]  No [ ] Termination date of Board (if known) dd/mm/yyyy  | Minister’s signature |
| FREQUENCY OF MEETINGS[ ]  Weekly [ ]  Half-yearly[ ]  Monthly [ ]  Yearly[ ]  Other \_\_[please specify]\_\_ | Date  |