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| **CABINET-IN-CONFIDENCE** | | CABINET OFFICE USE |
| [**CABINET APPOINTMENT SUMMARY SHEET**](file:///C:\Users\Templates\Cabinet\Cabinet%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)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 PAYABLE  Travel Reimbursement Yes  No | | | | | | | |
| CREATION DATE OF BOARD dd/mm/yyyy  TENURE 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 | | | |