

APPLICATION FORM – SHADOWING PROGRAMME

This form must be completed for an officer wishing to participate in the shadowing programme. This form is an application only and is not an approved shadowing placement opportunity. LGMA will seek to coordinate a suitable shadowing opportunity based on the information provided on this form. This form demonstrates that the home council has given due consideration and approval to the potential shadowing placement of the applicant.

APPLICANT DETAILS:

Title:

Given Names:

Surname:

SUBSTANTIVE POSITION DETAILS:

Position Title:

Council:

Classification:

Location:

Award:

CONTACT DETAILS:

Current Supervisor: Name:

Telephone:

DEVELOPMENT AREAS:

Please provide detail into identified development areas and what types of shadowing opportunities you are seeking:



APPROVAL TO APPLY FOR SHADOWING PROGRAMME:

Consent is given for name of applicant to apply for a shadowing programme from insert home council name.

It is understood that this is an application for a potential shadowing programme opportunity. A formal request to the Chief Executive Officer of the home council will be made if a suitable shadowing programme placement is identified.

Signature of direct supervisor Position Title Name of Supervisor: **Signature** Chief Executive Officer

Name:

The following information should be attached to your application:

Copy of latest development plan highlighting areas for development this shadowing programme will enhance

Applicant to Sign:

Resume

Print Name:	Position:

Signature:

Date:

ADDITIONAL INFORMATION

- Complete all applicable sections of the form.
- Council may contact your supervisor or Chief Executive Officer to negotiate the arrangements, including suitable dates.
- Please note that you must liaise with your own Council before applying to ensure that a leave of absence would be approved for a potential shadowing opportunity.
- The shadowing programme offers the applicant experience observing a role in a different local government environment in order to build capability and knowledge.
- The applicant has read and understood all provisions of the professional development placement programme brochure.

FORWARD COMPLETED AND SIGNED FORM TO:

LGMA Placement Programme <u>membership@lgmaqld.org.au</u> Telephone: (07) 3174 5007

Application for Shadowing LGMA PLACEMENT PROGRAMME LGMA © 2022