



Tertiary Campus Ministry Association (Australia) Inc.

ABN 752 395 65800

C/o Fr Bavin Clarke
Principal Chaplain
Queensland University of Technology
Chaplaincy
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NOMINATION FOR MEMBERSHIP

Name: _____

Title: _____

Institution: _____

Campus: _____

Campus Address: _____

Faith/Denomination: _____

Sponsoring Body: _____

Postal Address: _____

Contact Details:

Phone: _____

Fax: _____

E-mail: _____

Qualifications: (please list any tertiary qualifications)

Pastoral Experience (including industrial and/or educational)

Nature of Appointment:

Ongoing / Contract

(please specify length of contract) _____

Full time:

Part time: (please specify days/hours per week) _____

Declaration:

I _____ am willing to accept nomination to membership of the Tertiary Campus Ministry Association (Australia) inc. I understand that TCMA is a multi-faith body, and am willing to work co-operatively with chaplains of other faiths/traditions. I agree to abide by the constitution of the TCMA.

Signed:

Date:

Nominator: _____

Institution: _____

Contact Details:

Phone: (day) _____ (after hours) _____

Fax: _____

E-mail _____

I hereby nominate _____
for membership of the Tertiary Campus Ministry Association.

Signed:

Date:

Note: Once the form is completed by nominator and nominee, the nominator should forward the completed form to the Secretary of TCMA immediately. The nomination shall, upon its receipt by the secretary, be considered by the National Executive. The nominee will be informed in writing of the decision by the national executive, upon which payment of the annual fee should be forwarded to the TCMA treasurer.

Bavin Clarke – Secretary.

Post to:

Fr Bavin Clarke

Principal Chaplain

Queensland University of Technology

Chaplaincy

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