

# Nomination Form

## Most Accessible Community in Western Australia (MACWA) Awards



Regional Capitals Alliance

WESTERN AUSTRALIA

**Closing date:** 5pm Sunday, 1 July 2018  
**Nominations must be emailed to:** [dawnmrouse@gmail.com](mailto:dawnmrouse@gmail.com)  
**Contact Dawn Rouse on:** 0403 325 976

### CRITERIA

Local Government involvement in the promotion of the rights of people with a disability and advance access and inclusion for all.

Specifically, the Judging Panel will consider the following criteria:

1. Improve the accessibility of Council infrastructure and public open space;
2. Inclusive communication technology and information initiatives;
3. Accessible and inclusive Council services, programs and events;
4. Exercises leadership and influences community attitudes and perceptions.

Photographs and/or other evidence of your initiative as well as testimonials from people with a disability, their carers and family are encouraged.

Initiatives that go above and beyond the statutory obligations (DAIP, BCA etc.) will be highly regarded.

|                                   |                                |
|-----------------------------------|--------------------------------|
| <b>Local Government Nominated</b> | <b>City / Town / Shire of:</b> |
|-----------------------------------|--------------------------------|

|                        |                          |                  |                   |
|------------------------|--------------------------|------------------|-------------------|
| <b>Contact Details</b> | <b>Title &amp; Name:</b> |                  |                   |
|                        | <b>Organisation:</b>     |                  |                   |
|                        | <b>Address:</b>          |                  |                   |
|                        |                          |                  |                   |
|                        |                          | <b>Postcode:</b> |                   |
|                        | <b>Telephone:</b>        |                  | <b>Facsimile:</b> |
| <b>Mobile:</b>         |                          | <b>Email:</b>    |                   |

|  |                                |  |
|--|--------------------------------|--|
| <b>Category</b> (please mark 'X' to select category) | <b>Metropolitan Council</b>    |  |
|  | <b>Regional City / Capital</b> |  |
|  | <b>Regional Shire / Town</b>   |  |

### CONTACTS











# Nomination Form 2018 RCAWA MACWA Award



(If insufficient space, please attach additional information on a separate sheet).

Photographs and/or other evidence of your initiative as well as testimonials from people with a disability, their carers and family are encouraged. Please attach separately along with this form.

| Name (s) | Signature | Date   |
|----------|-----------|--------|
|          |           | ... .. |

**PLEASE RETURN by MAIL, EMAIL [dawnmrouse@gmail.com](mailto:dawnmrouse@gmail.com)**  
**UNSIGNED AND/OR UNDATED NOMINATIONS WILL NOT BE ACCEPTED.**  
**EMAILED NOMINATIONS MUST BE DIGITALLY SIGNED**