

CALL FOR NOMINATIONS FOR COMMITTEE REPRESENTATIVE

Position available – Committee of Paediatric Surgery WA Representative

Dear Fellows

After three terms on the Committee of Paediatric Surgery we will farewell Dr Japinder Khosa as the State Representative for Western Australia (WA) at the end of June 2024. As such, we are now calling for nominations for the WA Representative on the Training Committee, to commence as soon as possible.

The Training Committee presents a great opportunity to engage with the selection, education and pastoral care of our Paediatric Surgery Trainees. If you would like to further understand the role, its obligations and the current opportunities available please reach out to the Chair, Sarah Giutronich for more information (mobile – 0413 604 855 or via email sgiutronich@gmail.com).

Should you wish to be nominated for this position, please complete the attached nomination form, and provide a covering letter detailing about yourself and why you would like to take this position and an abridged version of your CV. Please send your nomination by email to Committee.PaediatricSurgery@surgeons.org by **5pm, 16 July 2024**.

In the event we receive more than one nomination for this position, an election will be held, and your covering letter and abridged CV will be distributed to all Fellows to cast their vote.

Please refer to the Terms of Reference on the website to review the responsibilities of the Committee and mandatory training courses that are required.

There are usually 5 Committee meetings each year with 1 Supervisors and Trainers meeting and 1 Supervisors Retreat, as well as email forums between these meetings as needed.

If you have any questions, please get in touch via Committee.PaediatricSurgery@surgeons.org.

Yours sincerely,



Dr Sarah Giutronich

Chair

Committee of Paediatric Surgery

Telephone +61 3 9276 7416

Committee.PaediatricSurgery@surgeons.org

Nomination Form for WESTERN AUSTRALIA STATE REPRESENTATIVE

COMMITTEE OF PAEDIATRIC SURGERY

Closing date for nominations is 16 JULY 2024

Full name of nominee
(PLEASE PRINT)

Hospital

Contact telephone

Email address

Full name of Nominator 1
(PLEASE PRINT)

Full name of Nominator 2
(PLEASE PRINT)

We wish to nominate the above nominee as the Western Australia Representative on the Committee of Paediatric Surgery of the Royal Australasian College of Surgeons

.....
Signature of Nominator 1

Date

.....
Signature of Nominator 2

Date

I consent to act if elected

.....
Signature of Nominee

Date

Please return completed forms to:

Executive Officer, Committee of Paediatric Surgeons
Email: Committee.PaediatricSurgery@surgeons.org

