**NOMINATION FOR HEALTH AND SAFETY REPRESENTATIVE (HSR) OR DEPUTY HEALTH AND SAFETY REPRESENTATIVE (DEPUTY HSR)**

*[Sections 60 and 67 Work Health and Safety Act (Qld)]*

I, ……………………………………………………………………………………………………………….. [

INSERT FULL NAME]

wish to nominate for the position of *(please circle)* –

**Health and Safety Representative OR**

**Deputy Health and Safety Representative**

Signature …………………………………………………………………….

Date ………………………………………………..

**Area of Representation**

Designated Work Group ………………………………………………..

Workplace ……………………………………………….........................

Workplace Address …………………………………………………………………………………..

**Note:** *You must be a member of the designated work group to be eligible to be elected as the Health and Safety Representative or Deputy Health and Safety Representatives for that work group.*