Please read A Guideline for Partnering with Consumer Advisors prior to completing this form. The guideline has been developed to assist you in completing this request form.

|  |  |
| --- | --- |
| 1. Name of initiative (e.g. project, activity, committee) | Click here to enter text.  |
| 2. Provide a plain English explanation of the initiative, including the purpose and the outcomes sought. | Click here to enter text. |
| 3. Do you have a project plan? Or Terms of Reference? | [ ]  No[ ]  YesIf yes please submit these documents with your completed request form. |
| 4. Provide an explanation of what you are expecting from partnering with a Consumer Advisor? | Click here to enter text. |
| 5. Level of participation from Consumer Advisor sought?(Refer to section X.X of *A Guideline for Partnering with Consumer Advisors*) | [ ]  Empower[ ]  Co-design[ ]  Collaborate[ ]  Consult[ ]  Inform |
| 6. Timeframe | [ ]  Ongoing commitment [ ]  Short term commitment[ ]  One-off commitment [ ]  Other Click here to enter text. |
| 7. When and where? | When will meetings/activity/event occur? Click here to enter text.Where? Click here to enter text.Approximately how many hours/month? Click here to enter text.  |
| 8. New or existing? | [ ]  New position[ ]  Replacement position |
| 9. Number of Consumer Advisors requested  | Click here to enter text. |
| 10. Do you know the consumer you want involved? | [ ]  No[ ]  Yesif yes, please provide the person’s name, telephone and email address and also please ask that person (people) to make contact with the Consumer Engagement Manager directly. Please provide them with the name of the initiative.Click here to enter text. |
| 11. Provide an explanation of the types of activities the Consumer Advisor will undertake? | Click here to enter text. |
| 12. Would you prefer the Consumer Advisor has a particular skill, knowledge or experience?  | Click here to enter text. |
| 13. Is there a budget to cover costs of participation? | Click here to enter text. |

Please send completed request forms along with any attachments to consumer.advisor@barwonhealth.org.au

If you have any questions please contact the Consumer Engagement Manager via consumer.advisor@barwonhealth.org.au or call (03) 4215 8922.

Consumer Advisor Request Form