



3. Please briefly outline your qualifications and abilities that will assist you in making an effective contribution to the work of a COGS Local Distribution Committee:

Blank lined area for response to question 3.

4. Please briefly outline your interest and reasons for standing in this election:

Blank lined area for response to question 4.

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## Section 2

The following information is being gathered for statistical purposes. Please tick the appropriate boxes. Personal information will be treated confidentially and kept on file at the Local Government & Community office.

1. Are you:  Male  Female
2. What is your age group:  Under 25  25-45  46-65  Over 65
3. What Ethnic group(s) do you belong to?
- Pakeha / N.Z European
- Māori Which iwi?
- Pacific Island Please specify:
- Asian
- European – Other
- African
- Other Please specify:
4. Do you have a disability?  Yes  No
- If 'Yes' Please specify:
5. Which category best describes your current employment situation? (Please tick one only)
- Home / Community work (unpaid)  Retired
- Student  Unemployed
- Receiving a social welfare benefit  Full time paid worker
- Part-time paid worker  Other
- If "Other," please specify:
6. What is your usual, or most recent, occupation?

Please return this completed form, in the stamped addressed envelope provided, to your nearest office of the Local Government and Community Branch of the Department of Internal Affairs (refer to the contacts list on pages 6 & 7 of the Candidates' Guide) so that it is received no later than **noon on Friday 4 April 2008**. Late, faxed or emailed returns will not be eligible for the election process.

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