**Expression of Interest to get involved as a Self Advocacy WA (SAWA) Member.**

**Self Advocacy WA (SAWA) is a Self Advocacy Peer Support Group**run by and for people with disabilities.

We’re seeking expressions of interest from people with disability to become a SAWA Member and join the SAWA Advisory Committee.

SAWA supported by PWdWA has secured an extension of time and additional funding from the Individual Capacity Building Program Grant Round 2019-20 for the Self Advocacy WA (SAWA) Capacity Building Project to June 2024.

The intention of this project is to provide the opportunity for SAWA Members to:

- Further develop skills in co-designing and co-facilitating meetings and forums, connecting with SAWA members, using social media and attending forums.

- Review and provide information on self advocacy in relation to individual and group issues.

- Connect and network with other organisations that do peer support.

**Meetings**

The SAWA Advisory Committee will meet approximately six times between May 2023 and June 2024. The meetings will be 90 minutes each time during the project. The committee is voluntary and supported by a paid project officer who will coordinate SAWA Advisory Committee meetings, workshops, events and material development.

Before expressing interest, please ensure your availability to attend most of the SAWA Advisory Committee meetings below. The first meeting will be in person, with the potential of some following SAWA meetings via zoom.

The first meeting will be:

Date: Wednesday, 10 May 2023

Time: 10.30 am – 12.00 pm

Venue: PWdWA at City West Lotteries House

            2 Delhi St

            West Perth.

The following meetings will be 10.30 am – 12.00 pm:

10 May 2023

12 July 2023

13 September 2023

8 November 2023

9 January 2024

12 March 2024.

If you would like to be SAWA Member Committee Member please complete Expression of interest form by **Friday 14 April.**

For more information please contact Sharon Stanton, Project Officer with PWdWA

Email: sawa@pwdwa.org

Phone: 0492 823 636

docs.google.com/forms?

**Expression of Interest to become a SAWA Member and join the SAWA Committee.**

Your full name

Your answer

Are you nominating for the Self Advocacy WA (SAWA) Committee

Your answer or YES or NO

Your residential address:

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Your email address:

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Your contact number:

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Any other additional info or details you'd like to share with us? We would love to hear why you will be a great addition to our SAWA Committee!