



Port Curtis Coral Coast Trust Ltd
Level 1/3 Maryborough St
BUNDABERG QLD 4670

(07) 4167 0037
reception@pccctrust.com.au
PO Box 537
BUNDABERG Q 4670

PCCC CULTURAL HERITAGE SURVEY AND MONITORING

EXPRESSION OF INTEREST FORM

Please return your completed form via email to reception@pccctrust.com.au or via post to Port Curtis Coral Coast Trust Limited, PO Box 537, Bundaberg QLD 4670.

If you have any queries or require assistance to complete this form, please contact the PCCC Trust Cultural Heritage Manager on (07) 4167 0037 or reception@pccctrust.com.au

APPLICANT INFORMATION: *Please print clearly and in capital letters*			
Surname:		First Name:	
Street address:			
City:	State:	Post Code:	
Phone:		Email:	
Postal address (If same as street address write 'AS ABOVE'):			
City:	State:	Post Code:	
Date of Birth:		Gender:	
IF APPLICANT IS UNDER 18, PARENT/CARER TO SIGN APPLICATION FORM Please indicate relationship to applicant:			
<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Grandparent	<input type="checkbox"/> Carer
<input type="checkbox"/> Other (please specify):			
Name: Date: Signature:			
OTHER PERSONAL INFORMATION			
Driver Licence: Yes <input type="checkbox"/> No <input type="checkbox"/>		Class type: Licence Number:	
		Expiry Date:	
White Card: Yes <input type="checkbox"/> No <input type="checkbox"/>		White Card Number:	

PLEASE INDICATE THE PCCC GROUP OF THE APPLICANT ON THIS APPLICATION:

Byellee Gurang Gooreng Gooreng Taribelang

PLEASE INDICATE THE APICAL ANCESTOR OF THE APPLICANT:

<input type="checkbox"/> Dina	<input type="checkbox"/> Jessie	<input type="checkbox"/> Jane	<input type="checkbox"/> Rosie	<input type="checkbox"/> Dulhu/Doolan
<input type="checkbox"/> Buller Tolsen (Norman Buller)	<input type="checkbox"/> Nellie Murray (a.k.a Nellie Watch and Alice Murray)	<input type="checkbox"/> Dolly (Mother of Johnson Matemate)	<input type="checkbox"/> Emma Jones (Wide of John Broom/e)	
<input type="checkbox"/> Maggie Little	<input type="checkbox"/> Rosie Blackman	<input type="checkbox"/> Molly Jones	<input type="checkbox"/> John Hill (Pig Pig)	
<input type="checkbox"/> Kitty of Gladstone	<input type="checkbox"/> Margaret Grant	<input type="checkbox"/> Betsy	<input type="checkbox"/> Elizabeth Tanwatt/Daniels	

*If you are not a current PCCC Trust Member, PCCC Ltd encourages you to complete the Membership application. See <http://www.pccctrust.com.au/our-services/membership/> *

NECESSARY PERSONAL PROTECTIVE EQUIPMENT (PPE)

Please tick the “Yes” boxes if you own any of the following items of PPE. If you don’t own these items of PPE, please tick the “No” box and indicate your size.

<u>Item</u>	<u>Yes</u>	<u>No</u>	
Full-Brim Hat	<input type="checkbox"/>	<input type="checkbox"/>	Size:
Long Sleeve Shirt	<input type="checkbox"/>	<input type="checkbox"/>	Size:
High Visibility Vest	<input type="checkbox"/>	<input type="checkbox"/>	Size:
Long Pants	<input type="checkbox"/>	<input type="checkbox"/>	Size:
Steel Cap Boots	<input type="checkbox"/>	<input type="checkbox"/>	Size:
Water Bottle	<input type="checkbox"/>	<input type="checkbox"/>	

RELEVANT EXPERIENCE AND OTHER CONSIDERATIONS

Have you had previous Cultural Heritage Management monitoring? Yes No

Do you have any circumstances or conditions that may impact your ability to work? Yes No

If yes, please provide further details:

Please list any other relevant formally recognised skills, qualifications, or certificates:

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