

# Alumni membership form



New South Wales Government  
Attorney General's Department

You are invited to join the Attorney General's Department of NSW Alumni. This is an opportunity for you to maintain friendships, establish networks and participate in departmental activities.

## Personal details

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Other.....
Family name	
Given name	
Previous name (if applicable)	
Date of birth (dd/mm/yyyy)	...../...../.....
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Are you from an Aboriginal or Torres Strait Islander background?	<input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Torres Strait Islander <input type="checkbox"/> No If you are both Aboriginal and Torres Strait Islander, please mark both "Yes" boxes.
Are you from a racial, ethnic or ethno-religious group, which is a minority in Australian society?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a person with a disability	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Contact details

Street address	
Town / suburb	
State	
Postcode	
Country	
Phone	
Email	

## Employment history

What year did you leave?	
What was your position title?	
Division / Business Centre?	

# Alumni membership form



New South Wales Government  
Attorney General's Department

## Your key areas of expertise (please tick as many as applicable)

<input type="checkbox"/> Legal	<input type="checkbox"/> Legislation / Policy	<input type="checkbox"/> Asset Mgt	<input type="checkbox"/> Administration
<input type="checkbox"/> IT	<input type="checkbox"/> Courts / Tribunals	<input type="checkbox"/> Human Services	<input type="checkbox"/> Management
<input type="checkbox"/> Project Mgt	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Communications	<input type="checkbox"/> Corporate Services
<input type="checkbox"/> Finance	<input type="checkbox"/> Sheriffs	<input type="checkbox"/> Other (please specify)	

## Alumni activities

Please indicate your interest in participating in the following:

Mentoring	<input type="checkbox"/> Yes <input type="checkbox"/> No
Providing advice for departmental projects	<input type="checkbox"/> Yes <input type="checkbox"/> No
Critiquing of draft reports, legislation, etc	<input type="checkbox"/> Yes <input type="checkbox"/> No
Assisting to organise AGD Alumni activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
Attending events	<input type="checkbox"/> Briefings <input type="checkbox"/> Social gatherings (lunch, dinner) <input type="checkbox"/> Committees, focus groups or forums <input type="checkbox"/> Other (please specify) .....

## Other comments

How did you hear about us?	<input type="checkbox"/> Website <input type="checkbox"/> Separation package <input type="checkbox"/> Word of mouth <input type="checkbox"/> Mail <input type="checkbox"/> Other (please specify) .....
----------------------------	--

We welcome comments and suggestions	
-------------------------------------	--

Thank you for completing this form, which can be returned to the AGD Alumni by:

**Email:** [alumni@agd.nsw.gov.au](mailto:alumni@agd.nsw.gov.au)

**Post:** AGD Alumni Coordinator  
Locked Bag 5111 Parramatta NSW 2124

The information you provide in this form will be used by the Department for the purpose of sending you information about the AGD Alumni. The Department will not distribute identifying or contact information to third parties without your permission.