# ABOUT THE NDIS CHAMPIONS APPLICATION FORM

This is the Application Form to apply to be an NDIS Champion. Please make sure you have read the [NDIS Champion Position Description](http://www.disabilityloop.org.au/champions.html) first.

This Application Form might take about 20-60 minutes to complete. There are 16 questions.

The purpose of this form is for you to give us (AFDO Disability Loop) some information about yourself so we can decide if you will get an interview to be an NDIS Champion. It is ok if you can’t answer all the questions – we are interested in people that haven’t got a lot of NDIS experience, but who are keen to learn – as well as people with experience.

This Application Form can be filled out in a number of different ways. Please choose the way that is easiest for you:

1. [An online version](https://www.surveymonkey.com/r/ndischampions) can be filled in. This will automatically be emailed to [disabilityloop@afdo.org.au,](mailto:disabilityloop@afdo.org.au) *or*

2. This Application Form can be [downloaded](http://www.disabilityloop.org.au/documents/NDIS_Champions_Application_Form.docx), filled in and posted to: Senior Manager AFDO

Level 2, Ross House 247 Flinders Lane

Melbourne, 3000 VIC, *or*

3. The Application Form can be [downloaded](http://www.disabilityloop.org.au/documents/NDIS_Champions_Application_Form.docx), filled in and emailed to [disabilityloop@afdo.org.au,](mailto:disabilityloop@afdo.org.au) *or*

4. You can call the AFDO Disability Loop office on (03) 9662 3324 or TTY

(03) 9662 3724 and give us the answers to the questions on the Application Form over the phone. Please note that we might have to ring you back if we are already helping someone else, *or*

5. You can film an Auslan video with answers to the questions on the Application Form and send a link of it to [disabilityloop@afdo.org.au,](mailto:disabilityloop@afdo.org.au) *or*

6. You can request a different way of sending your Application to us.

We are offering this role to 30 people. Please note that a lot more than 30 people might apply for this position and so you might miss out, even though you have good skills and a great personality.

# NDIS CHAMPIONS APPLICATION FORM

## 1. My full name is:

|  |
| --- |
|  |

## 2. My address is:

|  |
| --- |
|  |

## 3. My phone or TTY number is:

|  |
| --- |
|  |

## 4. My email address is:

|  |
| --- |
|  |

## 5. Please contact me by:

☐ Phone call

☐ Phone (SMS)

☐ Email

☐ Any of the above

☐ A different way (please tell us more)

|  |
| --- |
|  |

## 6. About my ABN (Australian Business Number):

☐ I do not have an ABN and need to talk to you about this more

☐ I will use the following ABN: (Please write the ABN number and business name connected to it)

|  |
| --- |
|  |

## 7. The NDIS Champion positions are only available to people with disability. What disability or chronic illness do you live with?

|  |
| --- |
|  |

## 8. Why you are interested in the NDIS Champions role?

|  |
| --- |
|  |

## 9. How do you like to find information about something new?

|  |
| --- |
|  |

## 10. How do you share information with other people?

|  |
| --- |
|  |

## 11. Do you have experience talking about disability issues beyond your own experience (meaning not just about your own disability)? Can you give us an example?

|  |
| --- |
|  |

## 12. Being an NDIS Champion will mean giving presentations from time to time, depending on the demand in your area. It might be 1-5 hours per week for the next few months. Do you have enough time to be an NDIS Champion?

|  |
| --- |
|  |

## 13. Tell us some information about your connections within the disability community. For example, are you connected to any organisations (both general community or related to disability)?

|  |
| --- |
|  |

## 14. With or without support, I can use Microsoft PowerPoint:

☐ Not very well

☐ Well

☐ Very well

☐ Not sure

## 15. The travel costs for the NDIS Champions training will be covered by AFDO Disability Loop. Are you able to travel to Melbourne to attend two days of training on 12-13 Sept or 22-23 Sept (note that you will not be able to choose the dates)?

|  |
| --- |
|  |

## 16. Is there anything else you would like us to know about you?

|  |
| --- |
|  |

Thank you for filling out this form.

Once you are ready to submit this form, please look at Page 1 of this document to find out how you can get it to us.