



Financial Services Consultants

Expression of Interest Form

Please note: Your registration details are only sought by the Community Business Bureau (CBB) for the purposes of indicating your interest in opportunities to work for the CBB as a Financial Services Provider and establishing your suitability for this work.

Name	
Preferred phone number for contact	
E-mail address	
Do you operate a Consulting business?	Y <input type="checkbox"/> N <input type="checkbox"/>
	If 'Yes', please provide your ABN no:
	If 'Yes', please confirm that you hold public liability and professional Indemnity insurance cover, or are prepared to obtain this cover. Insurances held Y <input type="checkbox"/> N <input type="checkbox"/> Insurances not held but can be obtained Y <input type="checkbox"/> N <input type="checkbox"/>
Please indicate your areas of expertise	Bookkeeping Y <input type="checkbox"/> N <input type="checkbox"/> Accounting Services Y <input type="checkbox"/> N <input type="checkbox"/> Strategic Financial Management Y <input type="checkbox"/> N <input type="checkbox"/>
Do you have past work experience in:	the community sector: Y <input type="checkbox"/> N <input type="checkbox"/> the government sector: Y <input type="checkbox"/> N <input type="checkbox"/> the private sector: Y <input type="checkbox"/> N <input type="checkbox"/>
I have read the information sheet for this opportunity - available on the CBB website: www.cbb.com.au	Y <input type="checkbox"/> N <input type="checkbox"/>
I will treat all information that arises from discussion with the CBB in the strictest confidence and expect the CBB to do likewise.	Y <input type="checkbox"/> N <input type="checkbox"/>
I have attached my Curriculum Vitae.	Y <input type="checkbox"/> N <input type="checkbox"/>

Please forward to M Colmagro mcolmagro@cbb.com.au or 102 Woodville Rd Woodville 5011