



Ministry of Social Development & Innovation

Cayman Islands Government

Expression of Interest for Appointment to the National Council for Persons with Disabilities

The Ministry of Social Development & Innovation (the “**Ministry**”) invites expressions of interest for appointment to the National Council for Persons with Disabilities (the “**Council**”).

Overview of the Council

The Council is the entity established under Part 3 of the Disabilities (Solomon Webster) Act, 2016 (the “**Act**”). The functions of the Council as per the Act are –

1. reinforcing and promoting recognition and acceptance within the Islands of the principle that a person with a disability, has the same fundamental rights as a person who does not have a disability;
2. promoting the dignity and autonomy of persons with disabilities, including their freedom of choice and independence;
3. ensuring full and effective participation in the Islands for persons with disabilities on an equal basis with persons who do not have disabilities; and
4. promoting respect for, and acceptance of, persons with disabilities.

As per the Act, the Council shall consist of –

- (a) not less than three members who are persons with disabilities, whether or not they are affiliated with an advocacy or service organization that works for the rights of persons with disabilities;
- (b) not less than three members who are from the private sector or who are affiliated with a non-Governmental advocacy or service organization that works for the rights of persons with disabilities;
- (c) not less than three members who are public officers having substantial knowledge of, and experience in, one or more of the following areas:
 - i. health;
 - ii. education;
 - iii. lifelong learning;
 - iv. employment; and
 - v. research and analysis; and
- (d) one member who is an attorney-at-law practising in the Islands.

Appointment of Council Members

Council members are appointed by the Cabinet. To support the Cabinet's decision-making process, the Ministry is conducting an expression of interest process to make recommendations about which members should be appointed to the Council.

Recruitment is being conducted for the following positions:

1. member who is a person with a disability;
2. member who is a person representing an advocacy or service organisation; and
3. an attorney-at-law practicing in the Islands.

From amongst the members, we will also be selecting a Deputy Chairperson for the Council.

Members are appointed for a period of three to six years depending on the appointment. In accordance with Section 7 of the Act each of the members of the Council (if they are not public servants) may receive remuneration in respect of each meeting attended. For more information regarding the Council or the appointments, please review the [Disabilities \(Solomon Webster\) Act, 2016](#).

Meetings are held once every two months for two hours, and members also participate in sub-committees which meet every two months. Additional meetings of the Council or sub-committees may be held, as necessary.

Applicants will be shortlisted and undergo an interview process by a committee. Successful applicants will then be recommended for Cabinet approval. Those appointed by Cabinet will be notified.

Application Process

In order to express your interest to become a member of the Council, please complete the accompanying application form and submit it with a copy of your resume inclusive of education, professional qualifications, relevant volunteer history and commission or board experience with the completed application.

Please note that the deadline for submission of expressions of interest is: Monday, 30 March 2026. Expressions of interest should be submitted to mofsd@gov.ky.

Applications received after the above deadline will be held by the Ministry and considered as and when vacancies arise in the Council.



Expressions of Interest for Appointment to the National Council for Persons with Disabilities

This application form is to be completed for anyone who is interested in expressing their interest to be a member of the National Council for Persons with Disabilities (the **"Council"**). Please also include a resume inclusive of education, professional qualifications, relevant volunteer history and commission or board experience with the completed application

Complete all parts of this application form and additional pages may be attached if necessary. Public officers are ineligible to be considered for appointment due to the remit/nature of the Council. Positions are voluntary.

Section A – Position

Please select the position(s) for which you are expressing interest:

- Member who is a person with a disability
- Member who is a person representing an advocacy or service organisation
- Attorney-At-Law

If you are appointed to the Council, would you also be interested in being considered for the role of Deputy Chairperson of the Council?

- Yes No

Section B - Personal Details

Title Mr. Ms. Other **Date of Birth**

Last Name **Previous Last Name(s)**

Given Names

Decorations/Honours/Titles

Mailing Address

Phone Number(s)

E-mail Address

Place of Employment

Immigration Status

Caymanian
 Permanent Resident
 Work Permit Holder
 RERC
 Other

How many years you have lived in the Cayman Islands?

Are you a Member of the Parliament? Yes No

Do you currently hold any public office? Yes No

Have you held a public office in the preceding 4 years? Yes No

Do you hold or have you held office in a political party the preceding 5 years? Yes No

Have you previously been appointed to the Council? Yes No

Have you previously been appointed to the Council of Older Persons? Yes No

Section C – Interest in Council

Please outline why you want to serve on the National Council for Persons with Disabilities.

Please detail your interest in the work of the National Council for Persons with Disabilities. This should include details of how your skills/experiences could assist the work of the Council, as well as your ability to commit to this work each month.

Section D – Character and Referees

1. **Have you ever been convicted of, or cautioned in relation to any criminal offence?** Yes No

[If yes, please provide details below, including the relevant dates.]

2. **Are you aware of anything in your private or professional life, which could be a source of embarrassment to yourself or the Cayman Islands Government if it became known in the event of an appointment?** Yes No

[If yes, please provide details below.]

3. Please list here two members of the community who you consider will be able to comment on your qualities and experience.

Referee #1

Full Name:

Job Title:

Email Address:

Telephone Contact:

Relationship:

Referee #2

Full Name:

Job Title:

Email Address:

Telephone Contact:

Relationship:

Section E – Declaration

Please complete and sign the following declaration.

I, _____, hereby certify that the information I have provided on this form is correct to the best of my knowledge, and may be verified by the Cayman Islands Government prior to or after my appointment.

Signature

Date

Expressions of interest will be held by the Ministry of Social Development & Innovation and will be considered as and when vacancies arise. Thank you for your interest.

Please submit completed form and resume to: mofsd@gov.ky by Monday, 30 March 2026