



CAYMAN ISLANDS GOVERNMENT

Expressions of Interest for Appointment to the Council of Older Persons

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. Please include a resume inclusive of education, professional qualifications, relevant volunteer history and commission or board experience with the completed application.

Section A – Position

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

- | | |
|--|---|
| ☐ Chair Person | ☐ Member, North Side Representative |
| ☐ Deputy Chairperson | ☐ Member, Bodden Town Representative |
| ☐ Attorney-At-Law | ☐ Member, George Town Representative |
| ☐ Medical Doctor | ☐ Member, West Bay Representative |
| ☐ Member, Sister Islands Representative | |

Section B - Personal Details

Title: Mr. ☐ Ms. ☐ Other: _____ Date of Birth _____
[Please state] [DD.MM.YYYY]

Last Name: _____ Previous last name(s): _____

Given Names: _____
[Please underline the name by which you prefer to be known]

Decorations/Honours/Titles: _____

Mailing Address: _____

Phone Number(s): _____

E-mail Address: _____

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? No ☐ Yes ☐

Do you currently hold any public office? No ☐ Yes ☐

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

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

Section C – Interest in Council *[Appointments are 4 years in duration]*

Please outline why you want to serve on the Council of Older Persons.

Please detail your interest in the work of the Council of Older Persons. 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?

No ☐

Yes ☐ *[Please provide details, including dates, below]*

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? No ☐ 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

Name: _____

Job Title: _____

Email Address: _____

Telephone Contact: _____

Relationship: _____

Referee #2

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