

2026 Expression of Interest

Fields marked with an asterisk (*) are required.

Fields marked with a caret (^) are for office use only.

Personal Details *

Name: *			
Date of Birth: * DD/MM/YYYY			
Language group: *		Community: *	
Mobile Number: *			
Email Address: *			
Postal Address/CMB: *			
Employer: *			
Job Title: *			
Work Phone Number: *			
Is this EOI self-nominated: *	YES	NO *	*If answered no, please list the name of the person making the nomination.
Name of person nominating: *			

Next of Kin Details *

Name: *			
Relationship: *			
Mobile Number: *		Phone Number: *	

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Applicant to complete *			
Highest year of schooling completed: *		Name of School/Year completed: *	
Year 9			
Year 10			
Year 11			
Year 12			
Previous qualifications: *		Name of Qualification: *	
Certificate I			
Certificate II			
Certificate III			
Certificate IV			
Diploma			
Other			
Which of the following do you currently have? *			Expiry Date/s: DD/MM/YYYY *
Current NT Driver's License	YES	NO	
First Aid Certificate	YES	NO	
Aboriginal Mental Health First Aid	YES	NO	
Ochre Card	YES	NO	
How did you find out about the First Circles Leadership Program? * (Select all that apply)			
Social Media		Word of Mouth	
Community Notice Board		Flyer / Poster	
		Work	
		Website	
		Family or Friend	

Why do you want to participate in the First Circles Leadership Program? *

Do you know someone from your community who has previously participated in the First Circles Leadership Program?

YES *	NO	* If answered yes, please name them below.
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How do you currently represent your community e.g. Board or Committee Member?
Please specify; *

What issues are currently effecting your community? *

How do think you can help with these issues as a leader? *

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What other interests or ambitions do you have e.g. Sports, Hobbies, Education/Study, Future job opportunities: *

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Are you able to provide a Curriculum Vitae (CV)/Resume?
Please attach to Nomination Form if you have a CV.

Signature of Nominee:	
Date: DD/MM/YYYY	

Please list two individuals that support your nomination (include your direct supervisor):*
Direct Supervisor Details:

Name: *			
Organisation: *		Job Title: *	
Mobile Number: *		Phone Number: *	
Email Address: *			

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Second Support Persons Details: *

Name: *			
Organisation: *		Job Title: *	
Mobile Number: *		Phone Number: *	
Email Address: *			

Employer/Supervisor to complete: *

The First Circles Leadership Program runs over a 6-month period and includes five week-long workshops held across multiple regions in the Northern Territory. Program participants will be required to travel out of community to attend each workshop. At times, we may need your assistance to help coordinate travel arrangements and ensure members are available to participate.

Are you able to support a First Circles member with coordinating travel and workshop participation in this capacity?

YES	NO *	<i>* If no, please briefly explain why. (We may be able to provide assistance.)</i>
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Do you have capacity to be a point of contact, on behalf of the First Circles team, to members who may be working in remote locations or have difficulty in communicating with us for the purpose of the program?

YES	NO *	<i>* If no, please briefly explain why. (We may be able to provide assistance.)</i>
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Does the Nominee have access to the following (in the workplace, for work purposes): *		
Computer	YES	NO
Microsoft Teams	YES	NO
Emails	YES	NO
Work Phone	YES	NO
Vehicle	YES	NO

What makes this nominee a suitable applicant for the First Circles Leadership Program? *

Terms of Reference

The Terms of Reference (ToR) for First Circles members are as follows:

- A First Circles member must be an Aboriginal person who comes from a Northern Territory remote community, homeland or town camp.
- Proactive in the community and throughout their region.
- Ability to liaise with community members, seeking advice and support for local and regional opportunities/initiatives.
- Participate in community forums, projects and policy development.
- Work collaboratively with the Department of the Chief Minister and Cabinet, local authorities and other agencies.
- If necessary support Departmental staff member visits and assist with community discussions.
- Attend workshops and the Cabinet meeting and actively participate in discussions.
- Adhere to First Circles' membership code of conduct.

Further Information / Submission of Application Form

Completed nomination forms can be emailed to: first.circles@nt.gov.au

Don't forget to include a copy of your resume/CV if you have one.

Successful applicants may be required to obtain an Ochre Card.

Visit aboriginalaffairs.nt.gov.au or call 08 8999 8579 for further information about the First Circles Leadership Program.