



## Request for an ATDC Lived Experience Advocate

### Organisation information

Name of organisation		Region	
Name & role of contact			
Contact email		Contact phone	

### Role details

Activity name			
Activity description			
What is the meaningful purpose of lived experience representation? How will the involvement of lived experience representation influence outcomes for your service, service users, and community?			
Role duration			
Once off		Ongoing	
Day		Duration details, incl. recurrence	
Date			
Time	From:      To:		
Address/electronic details		Address/electronic details	
Total hours funded		Total hours funded	
Any additional expenses? (travel, meals, etc.)			
Name of activity contact			
Contact email		Phone	



## Organisation support

Do you have a policy of lived experience engagement? Please attach if so
Who will be supporting them/who is their key contact person?
Will the Advocate be exposed to information that could cause distress? What is the support in place?
Any issues regarding confidentiality?
Is there an induction process, and who will conduct it? Please include their contact details



## Interests, skills and experience

Description of interests, skills and experience requested

## Prior support and preparation

Approximate hours of meeting preparation
Please attach Terms of Reference

**Please email completed form to the Lived Experience Advocate  
Service Coordinator: [leas@atdc.org.au](mailto:leas@atdc.org.au)**

For more information about the Lived Experience Advocate Service, go to [atdc.org.au/leas](http://atdc.org.au/leas) or contact the Lived Experience Advocate Service Coordinator on 03 6231 5002 or [leas@atdc.org.au](mailto:leas@atdc.org.au).