

Queensland Youth Cancer Service Youth Advisory Group



Expression of interest

Position title: Youth Advisory Group Member
Accountability: QYCS Steering Committee
Support: This is a voluntary position supported by the Queensland Youth Cancer Service Central team

*Help us provide better
care and treatment
for cancer patients.*

Your details

Name: _____
Date of birth: _____
Gender: _____
Address: _____
Suburb: _____
Postcode: _____
Phone: _____
Mobile: _____
Email: _____

So we can support you best, do you have any special needs?
Yes No Rather not say

Are you from a culturally and/or linguistically diverse background?
Yes No Rather not say
If yes, please specify:

Are you from an Aboriginal or Torres Strait Islander background?
Yes No

Do you identify as a:
Patient Sibling Partner

Do you have any dietary requirements?
Yes No
If yes, please specify:

Emergency contact details

Name: _____
Relationship: _____
Phone: _____

Education and employment

(To help us plan meetings)

Are you currently employed?
Yes No

If yes, are you working:
Full time Part time Casual

Occupation:

Are you currently studying?
Yes No

If yes, where are you studying?

High school
TAFE
Apprenticeship
University
Other: _____

What are you studying?

More information

Please tell us briefly about your cancer experience:

Please tell us briefly why you would like to be part of the Queensland Youth Cancer Service Youth Advisory Group:

Please outline any current community activities, hobbies, interests, studies and other experiences you feel are relevant to this role:

Please outline any training or education you believe would help you in your role with the Youth Advisory Group:

Thank you for completing this expression of interest. Please email your completed form to:

QYCS_CHQ@health.qld.gov.au

We will be in touch with you soon.

Contact us

Queensland Youth Cancer Service

Queensland Children's Hospital
501 Stanley St, PO Box 3474
South Brisbane 4101
E: qycs_chq@health.qld.gov.au

Alternative contact:

Kylie McPaul
Senior Social Worker
Youth Advisory Group Facilitator
E: QYCS_YouthAdvisory@health.qld.gov.au

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