



INDEPENDENT REGULATORY COMMISSION

CONSUMER ADVISORY COMMITTEE

Nomination Form

The IRC encourages all electricity consumers to have their say on energy issues and to contribute their experience, knowledge and ideas to improve electricity services in Dominica.

Date:			
Name:			
Street Address:		Parish	
Mailing Address: (if different from above)			
Phone:		Mobile:	
Email:			
Do you identify as:	Consumer <input type="checkbox"/> Electrician/Electrical Engineer (background) <input type="checkbox"/> Other: _____		
Are you a member of or associated with a membership organization or consumer group:	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list:		
Employment background: (Please state <i>current occupation</i> and mention which field(s) you have worked in over the past ten years?)			
How did you find out about the IRC Consumer Advisory Committee?	DBS <input type="checkbox"/> Q95 <input type="checkbox"/> KAIRI <input type="checkbox"/> SAT <input type="checkbox"/> MARPIN <input type="checkbox"/> CHRONICLE <input type="checkbox"/> SUN <input type="checkbox"/> DNO <input type="checkbox"/> FRIEND <input type="checkbox"/> IRC WEBSITE <input type="checkbox"/> OTHER WEBSITE <input type="checkbox"/> IRC STAFF <input type="checkbox"/> NAME OF FRIEND/STAFF: _____ OTHER: _____		

Consumer Advisory Committee Questions

- What issues or areas within electricity services interest you?

- What motivates or drives those interests?

- Why would you like to join the Consumer Advisory Committee?

- What experience do you have that would contribute to the work of the Consumer Advisory Committee?

- Why is consumer participation important to you?

- What do you hope to achieve by becoming a Consumer Advisory Committee member?

- Are you on any other community or consumer groups?

- Can you attend Consumer Advisory Committee meetings every two months?

Yes

No

- Have you had experience working on committees?

- Please give the name, telephone number, address, email address etc. of a personal referee?

Thank you for taking the time to complete this form. Please return the completed form and your Curriculum Vitae/Resume or personal bio to:

Corine Pinard

Complaints Clerk

Independent Regulatory Commission

P.O. Box 1687, Roseau

Commonwealth of Dominica

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