1. Entity Details

| 1. **Entity name**
 | 1. **Portfolio**
 |
| --- | --- |
| Insert here | Insert here |
|  |
| 1. **Method of establishment**
 |
| [ ]  Bill: Name is: Insert here[ ]  Legislation: Act and/or Regulation name is: Insert here , section number(s) Insert here [ ]  Cabinet approval Insert the reference number and date |
|  |
| 1. **Description**
 |
| Attach information describing the entity’s characteristics in terms of its: |
| * financial profile
* independence from government
* scope of risk
 | * focus
* qualification for appointment
* time commitment of members
 |

|  |
| --- |
|  |

|  |
| --- |
| 1. **Financial profile**

Use the information at 1d for the rating. One checkbox per row, in one or more rows as applicable. |

|  |
| --- |
| **Revenue** |
| **Highest** |  |  | **5. [ ]**  |  | **4. [ ]**  |  | **3. [ ]**  |  | **2. [ ]**  |  | 1. **[ ]**
 | **Lowest** |
|  |  | **$1B-$3B** | **⭢** | **$400M-$1B** | **⭢** | **$150-$400M** | **⭢** | **$40M-$150 M** | **⭢** | **< $40M** |
|  |
| **Total assets** |
| **Highest** |  |  | **5. [ ]**  |  | **4. [ ]**  |  | **3. [ ]**  |  | **2. [ ]**  |  | 1. **[ ]**
 | **Lowest** |
|  |  | **$2B-$6B** | **⭢** | **$800M - $2B** | **⭢** | **$300 - $800M** | **⭢** | **$80M-$300 M** | **⭢** | **< $80M** |
|  |
| **Expenditure** |
| **Highest** |  |  | **5. [ ]**  |  | **4. [ ]**  |  | **3. [ ]**  |  | **2. [ ]**  |  | 1. **[ ]**
 | **Lowest** |
|  |  | **$850M-2.5B** | ⭢ | **$350M-$850M** | ⭢ | **$130M-$350M** | ⭢ | **$35M-$130 M** | ⭢ | **< $35M** |
| **Financial assets/investments (Applies only to those entities responsible for funds under management)** |
| **Highest** |  |  | **5. [ ]**  |  | **4. [ ]**  |  | **3. [ ]**  |  | **2. [ ]**  |  | 1. **[ ]**
 | **Lowest** |
|  |  | **$10B-$40B** | ⭢ | **$2.5B-$10B** | ⭢ | **$600M-$2.5B** | ⭢ | **$150M-$600M** | ⭢ | **< $150M** |
|  |

|  |
| --- |
| 1. **Characteristics rating**

Select one option per row. |
| **Independence from Government** |
| **Highest** | 1. [ ]  **High**
 | **⭢** | 1. [ ]  **Moderate**
 | **⭢** | 1. [ ]  **Low**
 | **Lowest** |
|  |
| **Scope of risk** |
| **Highest** | 1. [ ]  **High**
 | **⭢** | 1. [ ]  **Moderate**
 | **⭢** | 1. [ ]  **Low**
 | **Lowest** |
|  |
| **Focus** |
| **Highest** | 1. [ ]  **State**
 | **⭢** | 1. [ ]  **Industry**
 | **⭢** | 1. [ ]  **Regional**
 | **⭢** | 1. [ ]  **Local**
 | **Lowest** |
|  |
| **Qualification for appointment** |
| **Highest** | 1. [ ]  **Critical**
 | **⭢** | 1. [ ]  **Significant**
 | **⭢** | 1. [ ]  **Moderate**
 | **Lowest** |
|  |
| **Time commitment of members** |
| **Highest** | 1. **[ ]  High**
 | **⭢** | 1. **[ ]  Moderate**
 | **⭢** | 1. **[ ]  low**
 | **Lowest** |

Section 2 Proposed Level and Remuneration

| 1. **Proposed level**

Select only one level, and select one or more of its criteria that best apply. |
| --- |
| **[ ]  Level B5:**  | *The criteria that best apply are:* | [ ]  B5-i | [ ]  B5-ii | [ ]  B5-iii | [ ]  B5-iv |  |
| **[ ]  Level B4:**  | *The criteria that best apply are:* | [ ]  B4-i | [ ]  B4-ii | [ ]  B4-iii | [ ]  B4-iv |  |
| **[ ]  Level B3:**  | *The criteria that best apply are:* | [ ]  B3-i | [ ]  B3-ii | [ ]  B3-iii |  |  |
| **[ ]  Level B2:**  | *The criteria that best apply are:* | [ ]  B2-i | [ ]  B2-ii | [ ]  B2-iii | [ ]  B2-iv | [ ]  B2-v |
| **[ ]  Level B1:**  | *The criteria that best apply are:* | [ ]  B1-i | [ ]  B1-ii | [ ]  B1-iii | [ ]  B1-iv |  |
|  |  |  |  |  |  |
| 1. **Supporting comments for the proposed level**

Insert comments to support the proposed level selected at 2a. |
| Start here |
|  |
| 1. **Proposed remuneration**

 Select one option only and insert the $ amount if applicable. |

| [ ]  | **Annual fee-within the range:** | Chair:  | $Insert here per annum | Member:  | $Insert here per annum |
| --- | --- | --- | --- | --- | --- |
| [ ]  | **Annual fee-below the range** | Chair:  | $Insert here per annum | Member:  | $Insert here per annum |
| [ ]  | **Standard daily sitting fee** | Chair:  | $Insert here per day. | Member:  | $Insert here per day |
| [ ]  | **Unpaid: No fees applicable**  |  |

Section 3 Authorisation and Contact Details

| **Name** | **Position** |
| --- | --- |
| Insert here | Insert here |
|  |
| **Agency** | **Phone** | **Email** |
| Insert here | Insert here |  |
|  |
| **Signature** | **Date** |
| Insert here | Insert here |
|  |
|  |
| Send the completed request with the supporting information to: boardremuneration@psc.nsw.gov.au |