AMA (WA) Member Engagement Forum

| Member Name: |
|--|
| Membership number: |
| Place of Work: |
| What category does your issue fall under? |
| Clinical |
| Workforce |
| ☐ Mental Health and Wellbeing |
| ☐ Public Health |
| Research |
| Who is most affected by the issue you have raised? |
| ☐ Salaried Doctors |
| ☐ Doctors in Training |
| ☐ Doctors in Private Practice |
| ☐ General Practitioners |
| Rural Practitioners |
| ☐ Medical Students |
| Others |
| Issue of concern: |
| |
| Please provide any details to support your concern: |
| |
| Have you undertaken any activities to date to advocate for your concern? |
| |
| What outcome would you like to see in this regard? |
| |

