



Consultancy Service Expressions of interest form

Business name _____

Contact name _____

Position _____

Street address _____ City _____

State _____ Postcode _____

Phone _____

Email _____

Consultancy service required	Please tick	Describe (number of workers, type of work undertaken etc).
Investigation of skin problems in the workplace		
Provide and advise on skin management in the workplace		
Advise on Return-To-Work options		

Additional relevant information

Please return form to

ODREC,
80 Drummond St Carlton
Vic 3053
Ph. 03 9623 9402
Fax. 03 9639 3575
Email admin@occderm.asn.au

Thank you for your interest in our consultancy service. A member of the ODREC team will contact you shortly.