

CITY OF BOCA RATON
BOARD AND COMMITTEE APPLICATION

NAME _____

HOME ADDRESS _____

BUSINESS NAME _____ OCCUPATION _____

BUSINESS ADDRESS _____

HOME PHONE _____ BUS. PHONE _____

AGE _____

ARE YOU A REGISTERED BOCA RATON VOTER? YES _____ NO _____

HOW LONG HAVE YOU RESIDED IN BOCA RATON? YEARS _____ MONTHS _____

HOW MANY BOCA RATON COUNCIL OR ADVISORY BOARD MEETINGS HAVE YOU
ATTENDED IN THE PAST THREE YEARS? _____

BOARD(S) OR COMMITTEE(S) PREFERENCE (Please indicate from one to three with one being your first choice):

- | | | | |
|---------------------------------|-------|-------------------------------------|-------|
| #Airport Authority | _____ | #Historic Preservation Board* | _____ |
| #Builders' Board of Adjustment* | _____ | Housing Authority* | _____ |
| Civil Service Board* | _____ | Library Advisory Board* | _____ |
| #Code Enforcement Board* | _____ | #Parks & Recreation Advisory Bd.* | _____ |
| #Community Appearance Board* | _____ | Pedestrian & Bikeway Advisory Bd.* | _____ |
| Community Relations Board* | _____ | Physically/Mentally Challenged Bd.* | _____ |
| Education Advisory Board* | _____ | #Planning & Zoning Board* | _____ |
| #Environmental Advisory Board* | _____ | #Police & Firefighters Pension Bd.* | _____ |
| Financial Advisory Board* | _____ | #Zoning Board of Adjustment* | _____ |
| #General Employees Pension Bd.* | _____ | Telecommunications Advisory Board* | _____ |

#Required to file Florida Financial disclosure statement.

*Dual membership on any of these boards is prohibited. Article II, Section 5, subsection (a) of the Florida Constitution states in part that "No person shall hold at the same time more than one office under the government of the state and the counties and municipalities therein."

Note: An appointment to one of your choices will eliminate your name from the applicant pool for your remaining choice(s).

EDUCATIONAL BACKGROUND

University attended: _____

Degrees received: _____

Major area of study: _____

BRIEFLY DESCRIBE WHY YOU WISH TO SERVE AS A MEMBER OF EACH BOARD OR COMMITTEE AND HOW YOUR PERSONAL EXPERIENCE AND BACKGROUND RELATE TO THE FUNCTION OF EACH BOARD OR COMMITTEE ON WHICH YOU WISH TO SERVE:

LIST COMMUNITY/CIVIC INVOLVEMENT: _____

PROFESSIONAL BACKGROUND (Please check the appropriate blanks)

(By code some boards have specific requirements for membership.)

- ____ Architect
- ____ Landscape Architect
- ____ Building Contractor
- ____ Sub-Contractor
- ____ Electrical __ Mechanical (HARV) __ Plumbing
- ____ Engineer
- ____ Real Estate Professional
- ____ Businessman
- ____ Planner
- ____ Other _____

Are you registered in the State of Florida? _____ Another state? _____

Are you licensed in the State of Florida? _____ Another state? _____

Do you hold a certificate of competency? _____

Do you possess a City of Boca Raton Occupational License? _____

How long have you practiced the above profession? _____

I HAVE REVIEWED AND UNDERSTAND THE DUTIES DESCRIBED IN THE ORDINANCE(S) COVERING THE ABOVE BOARD(S) OR COMMITTEE(S).

I ALSO UNDERSTAND THAT IN LIGHT OF THE FLORIDA CONSTITUTION'S PROHIBITION AGAINST DUAL OFFICEHOLDING (ARTICLE II, SECTION 5), MY ACCEPTANCE OF APPOINTMENT TO ANY EMPOWERING BOARD REQUIRES MY RESIGNATION FROM ANY OTHER EMPOWERED BOARD OF WHICH I AM A MEMBER.

I ALSO UNDERSTAND THAT MY ACCEPTANCE OF APPOINTMENT TO ANY EMPOWERING BOARD WILL REQUIRE MY RESIGNATION FROM ANY OTHER EMPOWERED BOARD OF WHICH I AM A MEMBER, PURSUANT TO FLORIDA CONSTITUTION, ARTICLE II, SECTION 5.

PLEASE ATTACH A COPY OF YOUR CURRENT RESUME.

Signature of Applicant

Date

MEMBERSHIP ON SOME BOARDS REQUIRE COMPLIANCE WITH FLORIDA LAW REGARDING THE FILING OF FINANCIAL DISCLOSURE FORMS WITH THE STATE OF FLORIDA DEPARTMENT OF ETHICS.

CITY COUNCIL CONDUCTS BOARD INTERVIEWS AT THEIR MONDAY WORKSHOP MEETINGS AT 1:00PM AND AT 6:00PM AT THEIR TUESDAY NIGHT REGULAR MEETINGS WHICH ARE HELD ON THE 2ND AND 4TH MONDAY AND TUESDAY OF THE MONTH UNLESS OTHERWISE STIPULATED.

Applications will be kept on file in the City Clerk's Office for one year. Applicants will be notified of vacancies prior to the scheduled interview.

For office use only.

Date notified _____ Board/Committee vacancy _____

Date interviewed _____ Appointed ____ Y ____ N

Date notified _____ Board/Committee vacancy _____

Date interviewed _____ Appointed ____ Y ____ N

Date notified _____ Board/Committee vacancy _____

Date interviewed _____ Appointed ____ Y ____ N

Notes: _____

Revised 01/22/99