



2018 Volunteer Board Appointment Application

If you are interested in serving on an appointed City Board, Commission or Committee, please complete this form in its entirety.

Return to: City Clerk's Office, 95 Triplet Lake Drive, Casselberry, FL 32707
(407) 262-7700, ext. 1133 dgardner@casselberry.org

This Application Form is a PUBLIC RECORD under Chapter 119, Florida Statutes, and is open to public inspection.

PLEASE TYPE OR PRINT CLEARLY:

Name: _____
First MI Last

Home Address: _____
Street Address (NO P.O. Box) City & Zip Code

Business Address: _____
Street Address (NO P.O. Box) City & Zip Code

Primary Phone: _____ Business Phone: _____

E-Mail Address: _____

Employer: _____ How Long: _____

Position/Occupation: _____

Brief Summary of Education and Work Experience:

(Please include highest level achieved and any degrees earned as well as any professional licenses or vocational certificates, etc.)

Please check (✓) the Board(s) you are interested in serving on:

- Planning & Zoning Commission/Land Planning Agency* (Meets 2nd Wednesday of each month @ 6:30 PM)
- Police Officers' & Firefighters' Pension Board of Trustees* (Meets quarterly each year @ 10:00 AM)
- Parks & Recreation Advisory Board (Meets 2nd Tuesday of each month @ 7:00 PM)
- Lakes Management Advisory Board (Meets quarterly each year @ 6:30 PM)
- OTHER:** _____

NOTE: Members of Boards listed in *italics* are **REQUIRED** to file detailed Financial Disclosure Forms annually.

Please indicate the PRIMARY Board you wish to be considered for: _____

1. Are you a City of Casselberry resident? Yes ___ No ___ If yes, how long? ___ Years ___ Months
2. Are you a registered voter in Seminole County? Yes ___ No ___ Precinct # _____
3. Do you own property in the City of Casselberry? Yes ___ No ___
4. Have you ever served on a City Board? Yes ___ No ___
If yes, which Board(s) and when? _____
5. Are you currently serving on a City Board? Yes ___ No ___
6. Are you employed by a government entity? Yes ___ No ___
If yes, please provide the name of the entity: _____
7. Potential Conflict of Interest: Do you do business, or are you engaged in the management of any business enterprise that has a financial interest with the City of Casselberry? Yes ___ No ___
If you answered yes, please give details, including the name of the enterprise, the nature of the business and the position you hold.

(CONTINUED ON REVERSE SIDE)

(CONTINUED FROM REVERSE)

Name: _____
First *MI* *Last*

Community Involvement: _____

Interests/Activities: _____

Why do you desire to serve on this/these Board(s)? _____

A resume or a separate sheet with additional information you wish to provide may be included, if you so desire.

- **THIS APPLICATION IS ONLY EFFECTIVE UNTIL 12/31/2018.** Please call, write or email the City Clerk's Office to advise of any changes. Applications are submitted to the City Commission when vacancies occur throughout the year. If you are not selected by 12/31/2018, you will need to fill out a new application to be considered in 2019.
- **Board Members serve at the pleasure of the City Commission and may be removed with or without cause upon motion and majority vote of the City Commission. Your signature below waives any right under F.S. Section 112.501 to removal for cause and a hearing before removal.**
- **All Boards and their members must function in accordance with provisions of the City Charter, City Code and Florida Laws, including GOVERNMENT IN THE SUNSHINE and the requirement for financial disclosure for certain boards. I understand the responsibilities associated with being a Board member, and affirm that I have adequate time to serve on the above board(s).**
- **CERTIFICATE OF APPLICANT: I hereby certify that all the statements made on this Volunteer Board Application Form are true and correct. I understand that any false statements or omissions from this Volunteer Board Application form may be cause for my application not to be considered by the City Commission.**

Signature of Applicant: _____ **Date:** _____

City Clerk's Office Use Only:
Date Application Received: ____/____/____
Date(s) Considered by Commission: ____/____/____; ____/____/____; ____/____/____
Appointed to: _____ **Date:** ____/____/____