



**ADVISORY BOARD – VOLUNTEER APPLICATION**

Thank you for your interest in serving the City of Edgewater. Your completion of this application is necessary so that the members of the City Council can thoroughly review each application as part of their consideration for the appointment.

Please choose the Board(s) for which you wish to apply. **If applying for more than one Board, you must number in order of your preference.**

- |                                |                                      |
|--------------------------------|--------------------------------------|
| _____ ANIMAL CONTROL           | _____ CITIZEN CODE ENFORCEMENT*      |
| _____ LIBRARY                  | _____ POLICE PENSION*                |
| _____ CONSTRUCTION REGULATION* | _____ RECREATION & CULTURAL SERVICES |
| _____ ECONOMIC DEVELOPMENT     | _____ PLANNING & ZONING*             |
| _____ FIREFIGHTERS PENSION*    | _____ VETERANS PARK AVD. COMMITTEE   |

Members of the Boards with an asterisk (\*) are required to file a Financial Disclosure form within 30 days of appointment.

**PERSONAL INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business/Cell Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Are you a resident of Edgewater \_\_\_ how long \_\_\_\_\_

Is your principal place of employment in Edgewater \_\_\_\_\_

At the present time, do you serve on any other City Boards or Commissions \_\_\_\_\_ if yes, please list each \_\_\_\_\_

Have you ever served on any Boards, agencies or committees \_\_\_\_\_ if yes, please list each \_\_\_\_\_

**REFERENCES** – Please list three business and/or personal

\_\_\_\_\_  
Name, address and phone

\_\_\_\_\_  
Name, address and phone

\_\_\_\_\_  
Name, address and phone

**EDUCATION**

High School \_\_\_\_\_

College \_\_\_\_\_

Degree(s) \_\_\_\_\_

**WORK EXPERIENCE** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**INTEREST/ACTIVITIES** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**COMMUNITY INVOLVEMENT** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**WHY DO YOU DESIRE TO SERVE ON THIS/THESE BOARD(S)?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**EXPERIENCE/QUALIFICATIONS RELATED TO BOARD(S) APPLYING FOR** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

A resume or separate sheet with additional information may be included with your application.

I understand the responsibilities associated with being a board member, and I have adequate time to serve if appointed.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Please return this application to Bonnie Wenzel, City Clerk, City of Edgewater, P.O. Box 100, Edgewater FL 32132 or drop off in the City Clerk’s Office, 104 N. Riverside Drive, Edgewater FL 32132. If you have any questions please call 386-424-2400.

<b>OFFICE USE ONLY</b>
Date Application Received _____
Date Appointed to Board _____
Board Appointed to _____
Date Resigned from Board _____