

**CITY OF EDGEWATER
CITY CLERK'S OFFICE**
104 North Riverside Drive
Edgewater, Florida 32132
cityclerk@cityofedgewater.org

Phone: (386) 424-2400 X 1102 FAX: (386) 424-2410



ADVISORY BOARD APPLICATION

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.**

- | | |
|---|---|
| <input type="checkbox"/> Animal Control Board | <input type="checkbox"/> Citizen Code Enforcement Board * |
| <input type="checkbox"/> Library Board | <input type="checkbox"/> Police Pension Board* |
| <input type="checkbox"/> Construction Board of
Adjustments & Appeals | <input type="checkbox"/> Recreation & Cultural Services Board |
| <input type="checkbox"/> Firefighters Pension Board* | <input type="checkbox"/> Planning & Zoning Board |
| <input type="checkbox"/> Veterans Park Advisory Committee | <input type="checkbox"/> School Scholarship Committee |
| <input type="checkbox"/> Economic Development Board | <input type="checkbox"/> General Employee Pension Board* |

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 _____

E-Mail Address _____

Occupation _____ Are you a resident of Edgewater? _____ how long _____

Is your principal place of employment in Edgewater? _____

Are you currently serving on a City Board? _____ Have you ever served on a City Board? _____

If yes, when and which Board? _____

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. Please return application to the City Clerk’s office.

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

Applicant Signature

Date

OFFICE USE ONLY
Date application received _____
Date appointed to board _____
Board appointed to _____
Date resigned from board _____