

Please mark the advisory board(s) for which you wish to be considered:

Economic Development Board	□Police Pension Board*
□Recreation & Cultural Services Board	□Firefighters Pension Board*
□Planning & Zoning Board*	General Employee Pension Board*

\*Members of these boards are required to file a Financial Disclosure form within 30 days of appointment. All persons appointed to any Board shall pass a background investigation prior to taking Oath of Office.

## PERSONAL

Name:	Phone:	
Address:		
Email:		
Occupation:		
Are you a resident of Edgewater: $\Box$ Yes $\Box$ No how long?		
Is your principal place of employment in Edgewater? $\Box$ Yes $\Box$ No		
Do you currently serve on a City Board? $\Box$ Yes $\Box$ No		
If yes, which Board?		
Have you ever served on a City Board? $\Box$ Yes $\Box$ No		
If yes, when and which Board?		
EDUCATION		
High School:	Date graduated:	
College: Date graduated:	Degree:	
EXPERIENCE/INVOLVEMENT		
Work Experience:		
Community Involvement:		
Interests/Activities:		
Please provide a brief statement concerning your interest and qualif	ications for serving on an advisory board	

**REFERENCES** please list three business or personal references

Name:	Address	Phone:
Name:	Address	Phone:
Name:	Address	Phone:

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.

Signature

Date

If you have questions concerning the duties and responsibilities of any of the advisory boards, please contact the City Clerk's office at 386-424-2400 or email <u>cityclerk@cityofedgewater.org</u>.

Return completed applications to the City Clerk's Office, 104 N. Riverside Drive, Edgewater, FL 32132; PO Box 100, Edgewater, FL 32132; or <u>cityclerk@cityofedgewater.org</u>