

CITY OF LIGHTHOUSE POINT APPLICATION FOR BOARD/COMMITTEE APPOINTMENTS

Your Service to our City is Earnestly Solicited

Service on a City Board provides citizens with an opportunity to help shape policy and direction for the City of Lighthouse Point. Residents are cordially invited to complete an application for a position on a City Board or Committee. When a position becomes available on a Board or Committee, all applications for that Board or Committee will be submitted for consideration. Applicants can be considered for more than one Board and/or Committee. All applicants must reside within the City of Lighthouse Point.

Please check the Board(s)/Committee(s) which you wish to be considered:

- | | | |
|---|---|---|
| <input type="checkbox"/> Beautification Committee | <input type="checkbox"/> Keeper Days Committee | <input type="checkbox"/> Planning and Zoning Board* |
| <input type="checkbox"/> Code Enforcement Board* | <input type="checkbox"/> Library Advisory Board | <input type="checkbox"/> Recreation Committee |
| <input type="checkbox"/> Community Appearance Board | <input type="checkbox"/> Pension Trustee Board | <input type="checkbox"/> Tennis Advisory Committee |
| <input type="checkbox"/> Historical Committee | <input type="checkbox"/> Personnel Appeals Board* | <input type="checkbox"/> Waterway Committee |
| <input type="checkbox"/> Insurance/Pension Committee* | | |

Application is for: Reappointment New Appointment

*****Per Section 112.317 Florida Statutes, Members of certain Boards are required to file a Financial Disclosure Report***

Please type or print information.

PERSONAL:

Name: _____ Telephone Number: () _____

Address: _____ Business Number: () _____
 Lighthouse Point, Florida Zip Code 33064 Cell Phone Number () _____

Email Address: _____

EDUCATION:

Name of High School: _____ Location: _____

College (if applicable): _____ Location: _____

Years Completed: _____ Degree: _____

Field of Study: _____

Other professional or technical training (Name of school, course name, etc.):

EMPLOYMENT: Resumes may be attached to this application.

Current Employer/Business Name: _____

Business Address: _____
Street City State Zip

Position: _____ Years of Service: _____

Duties: _____

OTHER QUALIFICATIONS:

Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board or Committee

MEMBERSHIPS:

Completion of this section is optional. The information will be helpful to the press if you are appointed; however, it is not a prime factor in making appointments.

<u>Lighthouse Point Organization(s)</u>	<u>Years in Membership</u>	<u>Office Held (if any)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Outside Cities

ACKNOWLEDGEMENT

I understand that in accordance with the Florida Sunshine Law, the above stated information is considered a public record.

I understand that appointment to any of the positions indicated above is a voluntary service and not compensated.

If appointed, I agree to faithfully and fully perform the duties of my office, will make every endeavor to serve my full term, and will comply with all laws or ordinances of the City, County, and State of Florida, particularly those pertaining to the conduct of public office and the financial disclosure requirements, if applicable to my position. I further agree to take the statutory oath. I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.

Signature of Applicant _____ Date _____

PLEASE RETURN THIS APPLICATION TO THE CITY CLERK'S OFFICE
City of Lighthouse Point • 2200 NE 38 Street • Lighthouse Point, FL • 33064