



Okeechobee County Citizen Board/Committee Application

Okeechobee County Board of County Commissioners
304 NW 2nd Street • Okeechobee, FL 34972
Phone: (863) 763-6441

Name _____ Date _____

I wish to be appointed to the following Boards or Committees (you may check more than one):

- Affordable Housing Advisory Committee** (also check all categories for which you qualify)
- ___ Real Estate Industry
 - ___ Local Planning Agency Member
 - ___ Banking/Mortgage Lending Industry
 - ___ Lay Person
 - ___ Provider of Essential Services
 - ___ Resident of Affected Jurisdiction
 - ___ Not for Profit Housing Provider
 - ___ For Profit Housing Provider
 - ___ Residential Home Builder
 - ___ Low Income Advocate
 - ___ Labor
- Agri-Civic Center Advisory Committee**
- Construction Industry Licensing Board** (also check the category for which you qualify)
- ___ Active Certified or Registered Contractor
 - ___ Active Specialty Contractor
 - ___ Lay Person
- Library Advisory Committee**
- Okeechobee Utility Authority**
- Planning Board/Board of Adjustments and Appeals**
- Tourist Development Council** (also check the category for which you qualify; proof of elector required)
- ___ Subject to Tourism Tax
 - ___ Involved in Tourism Industry, Not Subject to Tourism Tax
- Other** _____
- I am requesting reappointment to a Board/Committee on which I currently serve
- Term Expiration _____
- I am requesting to become a regular member rather than an alternate

Name: _____

Residence address: _____
Street City State

Current or most recent employer: _____

Job title/description: _____

Business address: _____
Street City State

Education: _____
High School College (name of college and degrees awarded)

Describe your experiences and interests or elements of your personal history that qualify you for this appointment: _____

List any memberships, awards, recognitions, degrees or certifications relevant to this appointment:

If you are applying for the Affordable Housing Committee, Construction Industry Licensing Board, or Tourist Development Council please describe how you are qualified specifically for the categories checked on Page 1: _____

Do you work with or have an association with a current member of any Board/Committee to which you are requesting appointment? **Yes** or **No**

If yes, please name Board/Committee member(s) and relationship: _____

Have you ever been elected or appointed to any public office in the State of Florida? **Yes** or **No**

If yes, please describe: _____

Are you related to any Okeechobee County employees? **Yes** or **No**

If yes, please name relative(s) and position: _____

Name: _____

Do you know of any reason why you may not be able to attend fully to the duties involved in the position to which you are requesting appointment? **Yes** or **No**

If yes, please explain: _____

Have you ever been arrested, charged or indicted for violation of any federal, state, county or municipal law, regulation or ordinance (exclude minor traffic violations)? **Yes** or **No**

If yes, provide details and disposition: _____

Have you previously served on other Boards or Committees? **Yes** or **No**

If yes, please list Board/Committee names and dates served

_____	_____
Board/Committee	Dates
_____	_____
Board/Committee	Dates
_____	_____
Board/Committee	Dates

List 3 references who know you well, excluding relatives.

_____	_____
Name	Occupation
_____	_____
Relationship/Association	Time Known
_____	_____
Name	Occupation
_____	_____
Relationship/Association	Time Known
_____	_____
Name	Occupation
_____	_____
Relationship/Association	Time Known

I hereby certify that the information in this application is correct. I hereby certify that:

I **am** / **am not** (circle one) an employee, elected or appointed official of Okeechobee County, Florida or any municipality, taxing district or utility authority therein; that

I **am** / **am not** an employee, elected or appointed official of the State of Florida or any of its agencies having jurisdiction in Okeechobee County, Florida; and that

I **am** / **am not** a citizen of the United States of America.

Signature

Date

Name: _____

Contact Info: _____

Home Phone

Cell Phone

Other Phone

E-mail Address

Mailing Address: _____

Street

City

State

Zip

Contact information for references listed on page 3:

Name of Reference

Address

Phone Number(s)

Name of Reference

Address

Phone Number(s)

Name of Reference

Address

Phone Number(s)

Date of Birth: _____ Place of Birth: _____

Race: American Indian or Alaska Native

Hispanic or Latino

Asian

Native Hawaiian or Other Pacific Islander

Black or African American

White

Other

Sex: Male Female

Please provide a copy of your driver's license or other picture identification demonstrating residency in Okeechobee County.

If you are requesting appointment to the Tourist Development Council, please provide proof of being an elector in Okeechobee County.

Please submit this completed and signed application to the County Administrator's office along with the information requested above. You may also submit any other materials, documentation or information that may be relevant to the Board of County Commissioners' consideration of your application.