

APPLICANT'S NAME: \_\_\_\_\_



## **VOLUNTEER ADVISORY BOARD APPLICATION**

***THIS APPLICATION IS VALID FOR ONLY ONE (1) YEAR FROM THE DATE ENTERED ON PAGE 4.***

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

If applying for more than one Board/Commission, **please number in order of preference**. If you have previously submitted an application, **it will be removed from our files** unless you mark the board(s) previously applied for on this application. ***Please choose no more than three Boards/Commissions for which you wish to apply.*** **You may not serve on more than two (2) boards at one time.**

- \_\_\_ AFFORDABLE HOUSING ADVISORY COMMITTEE
- \_\_\_ AGRI-BUSINESS INTER-RELATIONSHIP COMMITTEE
- \_\_\_ ANIMAL CONTROL ADVISORY BOARD
- \_\_\_ BEACH POLICY ADVISORY BOARD
- \_\_\_ CHILDREN & FAMILIES ADVISORY BOARD
- \_\_\_ CODE ENFORCEMENT BOARD **\*(1) \*\*(2)**
- \_\_\_ CONTRACTOR LICENSING AND CONSTRUCTION APPEALS BOARD **\*\* (2)**
- \_\_\_ CULTURAL COUNCIL
- \_\_\_ DAYTONA BEACH RACING & REC. FACILITIES AUTHORITY
- \_\_\_ EDUCATIONAL FACILITIES AUTHORITY **\*\* (2)**
- \_\_\_ GROWTH MANAGEMENT COMMISSION **\*(1) \*\*(2)**
- \_\_\_ HALIFAX AREA ADVERTISING AUTHORITY **\*\* (2)**
- \_\_\_ HEALTH FACILITIES AUTHORITY **\*\* (2)**
- \_\_\_ HEALTH PLANNING COUNCIL OF NE FLORIDA, INC.
- \_\_\_ HISTORIC PRESERVATION BOARD **\*\* (2)**
- \_\_\_ HOUSING FINANCE AUTHORITY **\*\* (2)**
- \_\_\_ HUMAN SERVICES ADVISORY BOARD
- \_\_\_ INDUSTRIAL DEVELOPMENT AUTHORITY **\*\* (2)**
- \_\_\_ LIBRARY ADVISORY BOARD
- \_\_\_ PERSONNEL BOARD
- \_\_\_ PLANNING & LAND DEVELOPMENT REGULATION COMMISSION **\*(1) \*\*(2)**
- \_\_\_ SOUTHEAST VOLUSIA ADVERTISING AUTHORITY **(2)**
- \_\_\_ SPRING HILL COMMUNITY REDEVELOPMENT AGENCY **\*\* (2)**
- \_\_\_ TOURIST DEVELOPMENT COUNCIL
- \_\_\_ VALUE ADJUSTMENT BOARD **\*\* (2)**
- \_\_\_ VOLUNTEER FIREFIGHTER RETIREMENT ADVISORY BOARD
- \_\_\_ VOLUSIA ECHO ADVISORY COMMITTEE
- \_\_\_ VOLUSIA FOREVER ADVISORY COMMITTEE
- \_\_\_ WEST VOLUSIA TOURISM ADVERTISING AUTHORITY **\*\* (2)**

- \* (1) Requires that appointee fill out a financial disclosure form to be filed with the supervisor of Elections.**
- \*\* (2) Constitutes a county office. No person may serve on more than one of these boards. No person shall hold at the same time more than one office under the government of the state and the counties and municipalities therein.**

**ALL THE ABOVE ARE SUBJECT TO THE SUNSHINE LAW \*\*\***

1. **PERSONAL**

Name: \_\_\_\_\_

Residence:

\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Mailing Address: (IF DIFFERENT FROM RESIDENCE):

\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_

Are you a registered Volusia County voter? \_\_\_\_\_

If yes, which District? \_\_\_ 1 \_\_\_ 2 \_\_\_ 3 \_\_\_ 4 \_\_\_ 5 (**You MUST circle your district #**)

Do you own homestead property in Volusia County? \_\_\_\_\_

How long have you been a resident of Volusia County? \_\_\_\_\_

What is your occupation? \_\_\_\_\_

Employer? \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Are you currently serving on any other County advisory boards? \_\_\_\_\_

If yes, which board? \_\_\_\_\_

**You may not serve on more than two (2) boards at one time.**

Have you ever served on a County advisory board? \_\_\_\_\_

If yes, when and which board(s)? \_\_\_\_\_  
\_\_\_\_\_

Do you serve on any other boards in Florida, or are you an elected or appointed state, county or municipal office holder, or Volusia County employee? \_\_\_\_\_

If yes, please name the board, position, etc. \_\_\_\_\_  
\_\_\_\_\_

Have you participated in the Citizen's Academy? \_\_\_\_\_

If yes, please provide your date of graduation: \_\_\_\_\_

**2. REFERENCES - Please list three references (business and/or personal)**

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NAME, ADDRESS AND TELEPHONE NUMBER

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NAME, ADDRESS AND TELEPHONE NUMBER

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NAME, ADDRESS AND TELEPHONE NUMBER

**3. EDUCATION**

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

College: \_\_\_\_\_ Degree: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

**4. WORK EXPERIENCE**

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**5. INTEREST/ACTIVITIES**

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**6. COMMUNITY INVOLVEMENT**

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**7. WHY DO YOU DESIRE TO SERVE ON THIS/THESE BOARDS?**

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

**I have read Resolution No. 2009-101, attached hereto, and understand the policy on compliance with good standing/clean hands with the County of Volusia.**

**PLEASE INITIAL \_\_\_\_\_**

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<b>Signature</b>	<b>Date</b>
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**THIS APPLICATION IS VALID FOR ONLY ONE (1) YEAR FROM THE DATE SIGNED ABOVE.**

**NOTE:** If you have questions concerning the duties and responsibility of any of the above Boards/Commissions, please contact the Deputy Clerk whose name and contact information are set forth below, or visit our website at [www.volusia.org/countycouncil](http://www.volusia.org/countycouncil).

**RETURN TO:** Marcy Zimmerman, Deputy Clerk  
County Manager's Office  
123 West Indiana Avenue – Suite 301  
DeLand, Florida 32720  
e-mail: [mzimmerman@co.volusia.fl.us](mailto:mzimmerman@co.volusia.fl.us)

**PHONE:** (386) 736-5920 x2398  
**FAX:** (386) 822-5707  
**WEBSITE:** [www.volusia.org](http://www.volusia.org)

**\*\*\*SUNSHINE LAW:** The primary purpose of Government in the Sunshine Law is to assure public access to the decision making processes of public boards and commissions. The Sunshine Law extends to discussions and deliberations as well as to formal actions taken by boards and commissions.



1 joint tenancy whether as tenant in common, tenant with right of survivorship or tenancy by the  
2 entirety has any delinquent or outstanding past due debt to Volusia County as hereinbefore  
3 described for business entities or organizations. Any existing board member shall have a grace  
4 period of sixty (60) days to pay any such past due amounts.

5 **SECTION II: DUTY TO DISCLOSE** Every person who serves in any council-appointed  
6 position subject to this Resolution or who makes application to serve thereon shall have an  
7 affirmative duty to disclose and provide to the county any outstanding past due indebtedness to the  
8 county and the identity of the people and entities which constitute the business as set forth in  
9 Section I above.

10 **SECTION III: INTERPRETATION** This Resolution, being for public purposes and for the  
11 welfare of the citizens of Volusia County, Florida, shall be liberally construed to effect the purposes  
12 hereof.

13 **SECTION IV: REPEAL OF CONFLICTING RESOLUTIONS** Any resolution which is in  
14 conflict with this Resolution is hereby repealed.

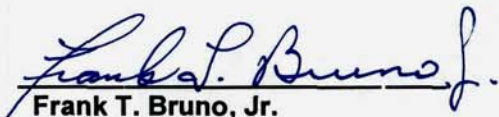
15 **SECTION V: EFFECTIVE DATE** This Resolution shall become effective as of July 16,  
16 2009.

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18 **DONE AND ORDERED IN OPEN MEETING.**

19  
20 **ATTEST:**  
21  
22   
23 **James T. Dinneen**  
**County Manager**

**COUNTY COUNCIL**  
**COUNTY OF VOLUSIA, FLORIDA**

  
**Frank T. Bruno, Jr.**  
**County Chair**