APPLICANT'S NAME: _____

VOLUNTEER ADVISORY BOARD APPLICATION

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. All Boards/Committees are subject to the Sunshine Law.

Important:

- **If applying for more than one Board/Commission, please *number* in order of preference.**
- ***Please choose no more than a total of three Boards/Committees (includes all sections).***
- **You may not serve on more than two (2) boards at one time.**
- **If you have previously applied, only your most recent application will be considered.**

Advisory Board Selection - Section 1	#1	#2	#3
AFFORDABLE HOUSING ADVISORY COMMITTEE			
AGRI-BUSINESS INTER-RELATIONSHIP COMMITTEE			
CHILDREN & FAMILIES ADVISORY BOARD			
ECHO ADVISORY COMMITTEE			
ENVIRONMENTAL AND NATURAL RESOURCES ADVISORY COMMITTEE			
HEALTH PLANNING COUNCIL OF NE FLORIDA, INC.			
HUMAN SERVICES ADVISORY BOARD			
MENTAL HEALTH AND SUBSTANCE ABUSE PLANNING COUNCIL			
TOURIST DEVELOPMENT COUNCIL			
VOLUNTEER FIREFIGHTER RETIREMENT ADVISORY BOARD			
VOLUSIA FOREVER ADVISORY COMMITTEE			

The Boards/Committees in section 2 below constitute 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:

Advisory Board Selection - Section 2	#1	#2	#3
CULTURAL COUNCIL			
DAYTONA BEACH RACING & REC. FACILITIES AUTHORITY			
EDUCATIONAL FACILITIES AUTHORITY			
FIRE CODE BOARD OF APPEALS			
HALIFAX AREA ADVERTISING AUTHORITY			
HISTORIC PRESERVATION BOARD			
HOUSING FINANCE AUTHORITY			
INDUSTRIAL DEVELOPMENT AUTHORITY			
PERSONNEL BOARD			
SOUTHEAST VOLUSIA ADVERTISING AUTHORITY			
VALUE ADJUSTMENT BOARD			
WEST VOLUSIA TOURISM ADVERTISING AUTHORITY			

The Boards/Committees in section 3 below require that appointees fill out a financial disclosure form to be filed with the Florida Commission on Ethics and constitute a county office. No person may serve on more than one of these or 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:

Advisory Board Selection - Section 3	#1	#2	#3
CONTRACTOR LICENSING AND CONSTRUCTION APPEALS BOARD			
CODE ENFORCEMENT BOARD			
PLANNING & LAND DEVELOPMENT REGULATION COMMISSION			
SPRING HILL COMMUNITY REDEVELOPMENT AGENCY			
VOLUSIA GROWTH MANAGEMENT COMMISSION			

APPLICANT'S NAME: _____

PERSONAL INFORMATION

Title: Mr.____ Mrs.____ Ms.____ Miss.____

Name:_____

Residence:_____

City: _____ State:_____ZIP:_____

Home Phone: _____Business Phone: _____

Cell Phone:_____ E-mail Address: _____

PREFERRED MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE):

Mailing Address: _____

City: _____ State:_____ZIP:_____

OTHER

Is your address or any other personal information exempt under the Florida Statutes?

Yes____ No ____

If yes, please cite the applicable Florida Statute: F.S. # _____

Please provide an alternate address, phone number or email address (if different from above) that should be used.

Alternate Address:_____

Alternate Phone Number:_____

Alternate Email Address:_____

What is your preferred form of communication?

Select the box to the right of the preferred form of communication.

Home Phone____ Business Phone____ Cell Phone____ Email ____

Are you a citizen of the United States? YES ___ NO___

Are you a registered Volusia County voter? YES ___ NO___

If yes, select the box to the right of the district number.

Volusia County (not city) District: 1___ 2___ 3___ 4___ 5___

Do you own homestead property in Volusia County? YES ___ NO___

How long have you been a resident of Volusia County? _____

Do you or the organization you are employed by have an existing contract with the County of Volusia? YES ___ NO___

EMPLOYMENT INFORMATION

Occupation:_____

Employer:_____

Business Address:_____

Business Phone:_____

APPLICANT'S NAME: _____

SERVING ON OTHER BOARDS

Are you currently serving on any other County advisory boards? YES ___ NO___

If yes, which board?

Important: You may <u>not</u> serve on more than two (2) County advisory boards at one time.

Have you ever served on a County advisory board? YES ___ NO___

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 (Volusia County or other county) or municipal ("city") office holder, or a Volusia County employee? YES ___ NO _____

If yes, please name the board, position, etc.:

Important: No person shall hold at the same time more than one office under the government of the state and the counties and municipalities therein.

CITIZEN'S ACADEMY

Have you participated in the Citizen's Academy? YES ___ NO___

If yes, please provide your date of graduation: _____

CRIMINAL BACKGROUND INFORMATION

Have you been convicted (including a withholding of adjudication), pled guilty or pled to a Nolo Contendere (no contest) to a misdemeanor or felony (including a criminal traffic violation)? YES ___ NO _____

A "YES" answer will not necessarily bar you from serving on an advisory board. The nature, severity, and date of the offense in relation to the position for which you are applying will be considered. If you are not sure or do not remember what happened in a criminal case(s), contact the appropriate county, state, or federal agency so that you can report accurate information on your criminal history. Failure to accurately report this information may result in removal from the board. If yes, please give details.

APPLICANT'S NAME: _____

REFERENCES (Please list three personal and/or business references)

Reference 1:

Name: _____

Address: _____

Telephone #: _____

Reference 2:

Name: _____

Address: _____

Telephone #: _____

Reference 3:

Name: _____

Address: _____

Telephone #: _____

EDUCATION

High School Name: _____

Degree:_____ Date of Graduation: _____

College Name:_____

Degree:_____ Date of Graduation: _____

WORK EXPERIENCE:

INTEREST/ACTIVITIES:

COMMUNITY INVOLVEMENT:

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

APPLICANT'S NAME: _____

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

INITIAL: _____

The following Boards require a criminal background check for which a release must be executed. I

_____

- **Halifax Area Advertising Authority**
- **Southeast Volusia Advertising Authority**
- **West Volusia Advertising Authority**

INITIAL: _____

I have read and understand the policy on compliance with good standing/clean hands with the County of Volusia as set forth in Resolution 2009-101. I am not in violation of the Volusia County Code of Ordinances and am not in violation of Resolution 2009-101.

INITIAL: _____

I certify that the information I provided in this application is true and correct.

INITIAL: _____

Signature: _____ Date: _____

If signed electronically, I adopt the electronic signature shown above.

(*IMPORTANT:* THIS APPLICATION IS VALID FOR ONLY ONE (1) YEAR FROM THE DATE SIGNED ABOVE)

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

RETURN TO: Karissa Green, Deputy Clerk
County Manager's Office
123 West Indiana Avenue – Suite 301
DeLand, Florida 32720
E-mail: kgreen@volusia.gov
Phone: 386-736-5928
Website: www.volusia.org

THE 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 all communications, discussions, and deliberations as well as to formal actions taken by boards and commissions.

NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT (TITLE II): "It is the goal of the County of Volusia to ensure that its programs, services, buildings, employment opportunities, communications, and work environments are accessible to all individuals, and to comply with the requirements of the Americans with Disabilities Act. The county also attempts to make its information and application forms accessible to all individuals. If you require assistance in filling out this form or require this form in an alternative format, please contact the County's Title II ADA Coordinator, Jim Corbett, at (386) 248-1760 to request assistance, an alternative format, or another alternative accommodation."