



## Advisory Board Application for Appointment

The information from this application will be used by the Orange County Board of County Commissioners when considering appointments to advisory boards, authorities, and commissions. Please complete the application in type or print clearly (**black ink only**). **Note:** A resume or separate sheet with additional information may be included, but **will not be accepted** as a substitute for the completed application. Return the completed application to:

Agenda Development Office  
P.O. Box 1393  
Orlando, Florida 32802-1393  
(407) 836-5426

Date: \_\_\_\_\_ Email: \_\_\_\_\_

Name: (Last, First, and Middle) \_\_\_\_\_

Address: (H) \_\_\_\_\_ Zip \_\_\_\_\_

(W) \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (H) (\_\_\_\_) \_\_\_\_\_ (W) (\_\_\_\_) \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

### 1. Education

Name of School	Degree(s) Earned
_____	_____
_____	_____

### 2. List of Advisory Boards (for which you are applying)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 3. Professional License, Occupational License, Registration or Certification

License/Registration/Certificate	Issue Date	Issuing Authority	Disciplinary Action/Date
_____	_____	_____	_____

### 4. State your experience, interests, or elements of your personal history that qualify you for appointment to the advisory board(s) you have chosen.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Have you, members of your immediate family, or businesses of which you or members of your immediate family have been an owner, officer, or employee, had any contractual or other dealing during the last three years with any Orange County Government agency, including the board to which you seek appointment?

YES  NO  If "YES", please explain: \_\_\_\_\_

6. List three persons who have known you well within the past five years. Include a current daytime telephone number and the capacity in which you have known them e.g., personal, business, supervisor. Do not list the person's job title as the capacity.

Name	Phone Number	Capacity
_____	(____) _____	_____
_____	(____) _____	_____
_____	(____) _____	_____

7. List any business, professional, civic, or fraternal organizations of which you are a CURRENT member.

\_\_\_\_\_

\_\_\_\_\_

8. Are you a resident of Orange County? YES  NO

9. Are you a registered voter in Orange County? YES  NO

10. County Commission District in which you reside: \_\_\_\_\_  
(This information can be found on your voter's registration card.)

11. Are you currently serving on an Orange County board? YES  NO   
If "YES," please state the name of the board(s).

12. Have you ever served on an Orange County board? YES  NO   
If "YES," please state the name of the board(s) and dates served.

Note: You are not required to answer the following questions. However, they are asked in order that boards, commissions, and authorities to which the Board of County Commissioners makes appointments may reflect the demographics of Orange County.

13. Are you of Hispanic Origin? Yes  No

14. Race: African-American  American Indian or Alaskan Native  Asian or Pacific Islander   
Caucasian  Other (explain) \_\_\_\_\_

15. Gender: Male  Female

16. Disabled: No  Yes

I understand the responsibilities associated with being a board member, and I have adequate time to serve on the above board(s).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_