

City of Deerfield Beach Application for Advisory Board or Committee

Advisory Board or Committee yo	ou are applying for	:		
Are you willing to be considered fo	r an alternate Boar	d or Committee?	Yes	No
Name				
Address				
City	State		Zip	
I reside in District # (can be found on back of your Voter Registration Card)				
Year- Round Resident?	Yes	No		
If No, how what months are you away?				
Home Phone	V	Vork/Mobile Phon	е	
E-mail				
Employer				
Address				
Occupation (if retired, please indicate and list former occupation)				
Please list any governmental Advisory Boards or Committees on which you currently serve:				

Complete the following. Please descrit feel may be useful for membership on t	be those facets of your background/experience which you his Board/Committee.
Academic: Degrees, Diplomas	
Professional: Certification(s)	
()	
Knowledge: Training, interest or experience	
Community Involvement: List organizations/p	ositions
Organizations: Memberships	
understand that the appointment is fo faithfully and fully perform the duties of will comply with all laws and ordinance	e Florida Sunshine Law, this information may be made public. I or voluntary, uncompensated service. If appointed, I agree to my office, will make every endeavor to serve my full term, and es of the City, County and State of Florida, particularly those als and the financial disclosure requirements, if applicable to my
Signature:	Date:
Print Name:	
Return completed application to: City Clerk's Office 150 NE 2 nd Avenue, Deerfield Beach Phone: 954-480-4213 Website: www.deerfield-beach.com	n, FL 33441 Fax: 954-480-4323 E-mail: web.clerk@deerfield-beach.com

PLEASE NOTE: Resumes/Additional information may be included; however, the application MUST be completed.