

# APPLICATION FOR APPOINTMENT TO CITY BOARD, COMMISSION OR COMMITTEE

City of Lake Wales, City Clerk's Office, P.O. Box 1320, Lake Wales, FL 33859-1320

Board/Commission/Committee \_\_\_\_\_

Applying for:		Yes Full-time	Yes Part-time	No		Yes	No
<input type="checkbox"/> reappointment	City Resident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	City Business Tax?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> new appointment	Registered Voter?	Yes, Florida <input type="checkbox"/>	Yes, Other <input type="checkbox"/>	No <input type="checkbox"/>	Own Property in City?	<input type="checkbox"/>	<input type="checkbox"/>

Name \_\_\_\_\_

Home Address	Home Phone
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Business Address	Business Phone
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Employer	Occupation/Type of Business
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If applicant is not a city resident or does not pay business tax to city, please provide physical address of property owned within the city limits.

Special knowledge or experience applicable to function of board/commission/committee

Other community involvement	Fla. Statute 760.80 requires the City of Lake Wales to maintain and report the following information: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 60%;"><b>Race/Ethnicity</b></td> <td style="width: 40%;"><b>Gender</b></td> </tr> <tr> <td>African-American _____</td> <td>Male _____ Female _____</td> </tr> <tr> <td>Asian-American _____</td> <td></td> </tr> <tr> <td>Hispanic-American _____</td> <td><b>Physically Disabled?</b></td> </tr> <tr> <td>Native-American _____</td> <td>Yes _____ No _____</td> </tr> <tr> <td>Caucasian _____</td> <td></td> </tr> </table>	<b>Race/Ethnicity</b>	<b>Gender</b>	African-American _____	Male _____ Female _____	Asian-American _____		Hispanic-American _____	<b>Physically Disabled?</b>	Native-American _____	Yes _____ No _____	Caucasian _____	
<b>Race/Ethnicity</b>	<b>Gender</b>												
African-American _____	Male _____ Female _____												
Asian-American _____													
Hispanic-American _____	<b>Physically Disabled?</b>												
Native-American _____	Yes _____ No _____												
Caucasian _____													

I understand that I may be required to complete a Financial Disclosure Form in accordance with the requirements of Florida Law for every year during which I serve as an appointee. I further understand that refusal to file a required Financial Disclosure will result in my removal from the board/commission/committee to which I have been appointed.

\_\_\_\_\_ applicant initials

Have you ever been convicted of a felony? <input type="checkbox"/> Yes If yes, please explain on separate paper and attach to application. <input type="checkbox"/> No	applicant signature _____  date _____
List 3 references who reside in the city:	If the applicant is not appointed at the next City Commission meeting scheduled for the purpose of making appointments, this application will be retained on file for 6 months.  e-mail _____
name _____ phone _____	
name _____ phone _____	
name _____ phone _____	
Contact City Clerk's Office to schedule appointment with board chairman and board support staff.	