

CITY OF HOLMES BEACH  
APPOINTMENT/RE-APPOINTMENT TO BOARD OR COMMITTEE  
(Please type or print clearly)  
RETURN COMPLETED FORM TO THE CITY CLERK'S OFFICE

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

APPOINTMENT: \_\_\_\_\_

RE-APPOINTMENT: \_\_\_\_\_

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

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

Mailing Address: \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Length of Residency:

Years \_\_\_\_\_

Months \_\_\_\_\_

ARE YOU A HOLMES BEACH REGISTERED VOTER STATE YES OR NO \_\_\_\_\_

E-MAIL: \_\_\_\_\_

OCCUPATION - IF RETIRED, PLEASE INDICATE FORMER OCCUPATION OR PROFESSION:

\_\_\_\_\_

BOARD OR COMMITTEES INTERESTED IN SERVING ON IN ORDER OF PREFERENCE:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

PLEASE LIST EDUCATION, PROFESSIONAL, OR COMMUNITY ACTIVITIES:

1. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

INDICATE YES OR NO ON THE FOLLOWING:

ARE YOU AVAILABLE FOR MEETINGS DURING REGULAR BUSINESS HOURS: \_\_\_\_\_

ARE YOU AVAILABLE FOR MEETING DURING EVENING HOURS: \_\_\_\_\_

ARE YOU AVAILABLE JANUARY THROUGH DECEMBER FOR MONTHLY OR SPECIALLY CALLED MEETINGS. \_\_\_\_\_

IF ANSWERING NO TO ANY OF THE ABOVE, PLEASE EXPLAIN:

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DO YOU HAVE FURTHER INFORMATION YOU WOULD LIKE TO SHARE FOR THE CITY COMMISSION'S CONSIDERATION?

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SIGNATURE OF APPLICANT

Note: Florida's Public Record's Law, CH. 119, F.S. states: - "It is the policy of this State that all State, County, and Municipal records shall at all times be open for a personal inspection by any person." Your application when filed will become a public record and subject to the above statute. In addition, any appointed member of a Board of any political subdivision and all members of bodies exercising Planning, Zoning, or Natural resources responsibilities are required to file a Financial Disclosure Form within 30 days after appointment as required by CH. 112, F.S.