ADVISORY BOARD INFORMATIONAL DATA



1	Name:			Date Completed			
1.	MR./MRS./MS.	LAST	FIRST	MIDDLE/MAIDEN			
2.	Business Address:						
		STREET	OFFICE #	CITY			
	POST OFFICE BOX	STATE	ZIP CODE	AREA CODE/PHONE NUMBE			
3.	Residence Address:						
		STREET	CITY	COUNTY			
	POST OFFICE BOX	STATE	ZIP CODE	AREA CODE/PHONE NUMBE			
	Specify the preferred mailing ad	Idress: Business	Residence□ E-MAIL_				
4.	Board of Interest:						
5.	Current Employer and Occu	pation:					
6.	Are you a United States citizen?	Yes □ No □	If "No" explain:				
7. 8.	Since what year have you been a continuous resident of Florida?						
	A. High School:		Yes	Year Graduated:			
		(NAME AND LOCATION)					
09.	Concerning your current employer and for all of your employment during the last five years, list your employer's name business address, type of business, occupation or job title, and period(s) of employment.						
	EMPLOYER'S NAME & ADDRESS	TYPE OF BUSINESS	OCCUPATION/JOB TITLE	PERIOD OF EMPLOYMENT			
10	A C4-4	:		- f 4h:			
10.	A. State your experiences and	interests or elements of your	personal history that qualify you	i for this appointment.			

В.	Have you received any de appointment? Yes □	egree(s), professional certific No □ If "Yes", li	cation(s), or designation st:	s(s) related to the subject ma	tter of this
C.	Have you received any av If "Yes", list:	wards or recognitions relatin	g to the subject matter of	of this appointment? Yes	No 🗆
D.	Identify all association m	emberships and association	offices held by you that	relate to this appointment:	
	three persons who have keephone number. Exclude ye		st five (5) years. Includ	e a current, complete address	s and
NAME	_	MAILING ADDRESS	ZIP CODE	AREA CODE/PHONE	NUMBER .
Do y	you know of any reason w n or will be appointed?	hy you will not be able to at Yes □ No □ If "Yes"	tend fully to the duties of, explain:	of the office or position to wh	ich you ha
If re	quired by law or administ	rative rule, will you file fina	ncial disclosure stateme	nts? Yes No	
				Signatu	re of Appli