CITY OF OAKLAND PARK
APPLICATION FOR ADVISORY BOARD APPOINTMENTS

Your Service to our City is Ernestly Solicited

Service on a Board or Committee provides citizens with an opportunity to help shape policy and direction for the City of Oakland Park. Residents are cordia1ly invited to apply for appointment by the City Commission to a City Board. All applicants must reside within the City of Oakland Park. Residents who have submitted an app1ication that is more than one year old are asked to resubmit an updated application.

Please check Boards/Committees for which you wish to be considered:

- ❑ Beautification Advisory Board
- ❑ Board of Adjustment*
- ❑ Civil Service Board
- ❑ Code Enforcement Board*
- ❑ Local Government Academy Participant
- ❑ Planning and Zoning Board*
- ❑ Police/Fire Pension Board*
- ❑ School Advisory Board
- ❑ General Employees:Pension Board*
- ❑ Unsafe Structures Board*

Application is for: ❑ New Appointment ❑ If you currently Serve on a Board, please state which Board _____

(Please note the Local Government Academy is not a Board, but an 8-week program with resident participants.)

** Per Section 112.317 Florida Statutes, Members of some Boards are required to file a Finaneial Disclosure Report*

Please type or print information.

PERSONAL: E-mail Address: _____

Name: _____ Telephone Number: _____

Residential Address: _____

Oakland Park, Zip: _____ Business Number: _____

(You must use your Oakland Park home address on this application and on any accompanying information (i.e. resume) in order to be considered for appointment to a board.)

Voting Precinct Number: _____

EDUCATION:

Name of High School: _____ Location: _____

College (if applicable): _____ Location: _____

Years Completed: _____ Degree: _____ Field of Study: _____

Other Professional or technical training (Name of school, course name, etc.): _____

EMPLOYMENT:

Current or last employer: _____ Address: _____

Position: _____ Years of Service: _____

Duties: _____

OTHER QUALIFICATIONS:

Briefly describe any specific expertise and/or abilities that would pertain to your service on a City Board:

_____

MEMBERSHIPS:

Oakland Park Organization(s) Years in Membership Office Held (if any)

_____

Outside City:

_____

ACKNOWLEDGMENT

I understand that in accordance with the Florida Sunshine Law, this information will be available for public review and I waive any objection to such publication.

I understand that appointment to any of the positions indicated above is a voluntary service and not compensated.

If appointed, I agree to faithfully and fully perform the duties of my office, will make every endeavor to serve my full term, and will comply with all laws or ordinances of the City, County, and State of Florida, particularly those pertaining to the conduct of public office and the financial disclosure requirements, if applicable, to my position.

I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.

_____ _____

Signature of Applicant **Date**

Please Completely Fill Out & Return this Application to the City Clerk's Office for Processing.
City of Oakland Park • 3650 NE 12 Avenue • Oakland Park, FL 33334 • 954-630-4300

Applications will be valid for a period of one year