

**Proposed  
CITY OF OAKLAND PARK  
APPLICATION FOR ADVISORY BOARD APPOINTMENTS**

**Your Service to our City is Earnestly 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 cordially invited to apply for appointment by the City Commission to a City Board. **Applications are valid for three (3) years.**

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

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Beautification Advisory Board | <input type="checkbox"/> General Employees Pension Board* | <input type="checkbox"/> Unsafe Structures Board*   |
| <input type="checkbox"/> Board of Adjustment*          | <input type="checkbox"/> Planning and Zoning Board*       | <input type="checkbox"/> <b>Charter Review Board</b>  |
| <input type="checkbox"/> Civil Service Board           | <input type="checkbox"/> Police/Fire Pension Board*       | <input type="checkbox"/> Local Government Academy Participant                                 |
| <input type="checkbox"/> Code Enforcement Board*       | <input type="checkbox"/> School Advisory Board            | (Please note the Local Government Academy is not a Board, but an 8-week program with resident |

**Application is for:**  New Appointment  Re-submission  If you currently serve on a Board, please state which Board \_\_\_\_\_

\* Per Section 112.317 Florida Statutes, Members of Some Boards are required to file a Financial Disclosure Report.

*Please type or print information.*

**PERSONAL:**

Name: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_ Oakland Park, Zip: \_\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_

Business Number: (\_\_\_\_) \_\_\_\_\_ Cell Number: (\_\_\_\_) \_\_\_\_\_

**(You must use your Oakland Park home address on this application.)** 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 (Check Below):**

- I understand that in accordance with the Florida Sunshine Law, this information will be available for public review and I waive any objections to such publication.
- I understand that appointment to any of the positions indicated above is a voluntary service.
- 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, if appointed, an updated application must be submitted to seek appointment to another advisory board.
- I understand that if appointed, I must take the oath of office prescribed in the Florida Statutes.
- I understand that I may sit on only one Commission appointed board.

\_\_\_\_\_  
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 three years**