



CITY OF FORT PIERCE

100 NORTH US HWY 1
FORT PIERCE, FLORIDA 34950
(772) 467-3066 FAX (772) 467-3841

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CITY CLERK'S OFFICE
CITY OF FORT PIERCE

APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: HISTORIC PRESERVATION BOARD

Name: <u>DR. ANN ROCCON</u>	Phone: <u>(772) 462-7705</u>
Home Address: <u>206 RIVER WALK</u> City/Zip Code: <u>FT. PIERCE 34949</u>	How long at this address? <u>3 YRS</u>
Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Occupation: <u>PROFESSOR INTERIOR DESIGN</u>	
Do you own a business that operates within the City of Fort Pierce? If yes, list the address and nature of said business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Do you now or in the future plan to do business with the City of Fort Pierce? If yes, in what capacity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are you employed by a business that is located within the City of Fort Pierce? If yes, state the business and location: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>INDIAN RIVER STATE COLLEGE</u> <u>3209 VIRGINIA AVE</u>	
Do you have special training or knowledge in the area of: Architecture: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Engineering: <input type="checkbox"/> Yes <input type="checkbox"/> No Real Estate Brokering: <input type="checkbox"/> Yes <input type="checkbox"/> No Contracting: <input type="checkbox"/> Yes <input type="checkbox"/> No Land Development: <input type="checkbox"/> Yes <input type="checkbox"/> No Other: <u>HISTORIC PRESERVATION</u> Describe your education, background, training and knowledge in the above area(s): <u>BD from UF - INTERIOR DESIGN from COLLEGE OF ARCHITECTURE</u> <u>MS from FSU - INTERIOR DESIGN SPECIAL ATTENTION HISTORIC PRESERVATION</u>	
Are you currently a member of a Commission-appointed board/committee? If yes, please specify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Have you ever been convicted of a felony? If yes, what was the nature of the crime(s) you were convicted of: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Referred by: <u>Mike Menard</u>	Applicant Email Address: <u>aroccon@irsc.edu</u>
Date: <u>9/14/2016</u>	Applicant's Signature: <u>Ann Roccon</u>

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.
Please return form to: City Clerk's Office - 100 North US Hwy 1, Fort Pierce, Florida 34950
fax (772) 467-3841 or via email at lcox@city-ftpierce.com