

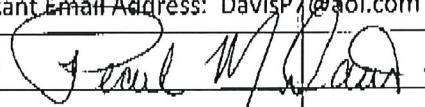


# CITY OF FORT PIERCE

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

## APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: Civil Service Appeals Board

Name: Pearl M. Davis-Liverpool		Phone: 772-240-2328
Home Address: 2006 Avenuc Q City/Zip Code: Fort pierce, FL 34950		How long at this address? 10 years
Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Occupation: Senior Vice President, Credit Risk Review Manager, Seacoast Bank		
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
Do you have special training or knowledge in the area of: Architecture: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Engineering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Real Estate Brokering: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Contracting: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No    Land Development: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    Other: Describe your education, background, training and knowledge in the above area(s): Banking		
Are you currently a member of a Commission-appointed board/committee? If yes, please specify:		<input checked="" type="checkbox"/> Yes <input 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:	Applicant Email Address: DavisP7@aol.com	
Date: 7/10/2017	Applicant's Signature 	

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