



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: Communitywide Council Advisory Board

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|--|--|
| Name: Sarah Smith | Phone: 772-579-8608 |
| Home Address: 614 Ave I Apt 2 City/Zip Code: Fort Pierce, FL 34950 | How long at this address? 3.5 years |
| Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Occupation: Economic Development Coordinator / Real Estate Agent | |
| Do you own a business that operates within the City of Fort Pierce? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list the address and nature of said business: | |
| Do you now or in the future plan to do business with the City of Fort Pierce? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, in what capacity? Unsure at this time. | |
| Are you employed by a business that is located within the City of Fort Pierce? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, state the business and location: St Lucie County BOCC | |
| Do you have special training or knowledge in the area of: Architecture: <input type="checkbox"/> Yes <input type="checkbox"/> No Engineering: <input type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Other: Emergency Management Describe your education, background, training and knowledge in the above area(s): Planning and Development, grants management, impact fee mitigation, project management, Situation Unit Leader, Real Estate Agent | |
| Are you currently a member of a Commission-appointed board/committee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please specify: | |
| Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, what was the nature of the crime(s) you were convicted of: | |
| Referred by: N/A | Applicant Email Address: Jeciera@gmail.com |
| Date: April 27, 2020 | Applicant's Signature Sarah Smith |

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