



CITY OF FORT PIERCE

100 NORTH US HWY 1
FORT PIERCE, FLORIDA 34950
(772) 467-3065 fax (772) 467-3841

APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: **Keep Fort Pierce Beautiful**

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|--|--|
| Name: Tishunda Tullis | Phone: 772-979-2585 |
| Home Address: 8605 W. Angle Road City/Zip Code: Fort Pierce, FL 34947 | How long at this address? 8 years |
| Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Occupation: Speech Language Pathologist / Business Owner | |
| Do you own a business that operates within the City of Fort Pierce? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the address and nature of said business: 1801 S. 23rd St., Unit 2. Fort Pierce, FL 34950 Pediatric Therapy | |
| 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? Not at this time | |
| Are you employed by a business that is located within the City of Fort Pierce? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, state the business and location: | |
| 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 checked="" type="checkbox"/> No Real Estate Brokering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Contracting: <input type="checkbox"/> Yes <input type="checkbox"/> x Land Development: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Other: Describe your education, background, training and knowledge – (feel free to attach a resume): B.S. Zoology / Chemistry, M.S. Communication Disorders, Licensed Speech Therapist | |
| Are you currently a member of a Commission-appointed board/committee? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: I am currently a Keep Fort Pierce Beautiful Board Member | |
| 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: Applicant Email Address: johnsontishunda@gmail.com | |
| Date: 07-13-2021 | Applicant's Signature: <i>Tishunda J. Tullis</i> |

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@cityoffortpierce.com