

Print

Application For Appointment/Reappointment - Submission #22599

Date Submitted: 7/29/2024

Name of Board or Boards for which you are applying:*

Communitywide council and Civil Service Appeal Board and Fort Pierce Housing Authority

Name:*

Louise Scurry

Home Address:*

1458 North Lawnwood Circle apt 24A

City:*

Fort Pierce

State:*

FL

Zip:*

34950

How long at this address?*

20

Telephone Number*

8635099982

If less than two years, provide prior address:

Are you a citizen of the United States? *



Yes



No

Occupation: *

Family Support Specialist

Employer:*

KIDS Connected by design

Do you own a business that operates within the City of Fort Pierce?*

Yes

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 or the Fort Pierce Utilities Authority(FPUA)?*

Yes

No

If yes, in which organization and in what capacity?

Fort Pierce

Are you employed by a business that is located within the City of Fort Pierce?*

Yes

No

If yes, state the business and location:

Florida

Do you have special training or knowledge in the area of:

Engineering:*

Yes

No

Architecture:*

Yes

No

Real Estate Brokering:*

Yes

No

Finance/Accounting:*

Yes

No

Contracting:*

Yes

No

Land Development:*

Yes

No

Utilities:

Yes

No

Management:*

Yes

No

Describe your professional background and what expertise you will bring to this Board. (Attach your resume or other applicable information below if desired) *

I have worked with the election supervisor as a lead poll worker, the Federal LIHEAP Energy fair with assisting families with the application process, a federal program that provides critical home heating and cooling help to vulnerable American families in Fort Pierce, and Mustard Seed Minister volunteering. I serve on many communities non-profit group to help our community

Are you currently a member of a Commission-appointed board/committee?*

Yes

No

If yes, please specify:

Have you ever been convicted of a felony?*

Yes

No

If yes, what was the nature of the crime(s) you were convicted of:

If appointed, are you willing to attend a training session which could last several hours?*

Yes

No

Referred by:*

word of mouth

Applicant Email Address:*

blessed622002@yahoo.com

Date:*

07/29/2024

Applicant's Signature:*

Louise Scurry

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.

For additional information, please contact the City Clerk's Office at 772.467.3065 or email lcox@cityoffortpierce.com.

Upload Resume (Optional)

Choose File

No file chosen