

# Print

## Application For Appointment/Reappointment - Submission #24723

Date Submitted: 3/9/2026

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

Affordable Housing Advisory Committee

Name:\*

Donna Lea Askman

Home Address:\*

4110 Worlington Terrace

City:\*

FORT PIERCE

State:\*

FL

Zip:\*

34947

How long at this address?\*

18 Years

Telephone Number\*

9545997536

If less than two years, provide prior address:

702 South 6th Street

Are you a citizen of the United States? \*

Yes

No

**Occupation: \***

Program Director

**Employer:\***

Habitat for Humanity St. Lucie & Okeechobee

**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:**

Habitat for Humanity St. Lucie & Okeechobee

**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

Yes

No

If yes, in which organization and in what capacity?

Habitat for Humanity St. Lucie & Okeechobee - Partnering to repair homes and utilize SHIP funding for DPA

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

Yes

No

If yes, state the business and location:

FL

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

**Engineering:\***

Yes

No

**Architecture:\***

Yes

No

**Real Estate Brokering:\***

Yes

No

**Finanace/Accounting:\***

Yes

No

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 been the Program Director for Habitat for Humanity for the past 10 years. My job specifically works with low-income residents to achieve affordable homeownership and to repair homes for low-income homeowners so they can live in decent and safe homes.

**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:\***

**Applicant Email Address:\***

**Date:\***

**Applicant's Signature:\***

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](mailto:lcox@cityoffortpierce.com).

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**Upload Resume (Optional)**

No file chosen