

Print

Application For Appointment/Reappointment - Submission #24710

Date Submitted: 3/4/2026

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

Affordable Housing Advisory Committee

Name:*

Cornella Sears

Home Address:*

2505 Ave R Apt. B

City:*

Fort Pierce

State:*

FL

Zip:*

34947

How long at this address?*

4 years

Telephone Number*

772-300-6162

If less than two years, provide prior address:

Are you a citizen of the United States? *





Yes



No

Occupation: *

Paralegal

Employer:*

Philip DeBerard Injury Attorney

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:

2505 Ave R. Fort Pierce FL,34947- Cleaning 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?

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

Yes

No

If yes, state the business and location:

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

Engineering:*

Yes

No

Architecture:*

Yes

No

Real Estate
Brokering:*

Yes

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 will bring lived experience and firsthand understanding of how housing policies affect working families, renters, and indivial navigating rising housing cost. I understand the challenges residents face when trying to secure stable, affordable housing including communication barriers, access to information and financial pressures. I will bring practical insight and an accountability voice.

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:*

City of Fort Pierce Broadcast

Applicant Email Address:*

cornellasears89@gmail.com

Date:*

03/04/2026

Applicant's Signature:*

Cornella Sears

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 770-467-2065 or email

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Upload Resume (Optional)

No file chosen