

Print

Application For Appointment/Reappointment - Submission #23205

Date Submitted: 10/4/2024

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

Wesley Sands Jr.

Name:*

Wesley Sands Jr.

Home Address:*

309 South 23rd Street

City:*

Fort Pierce

State:*

FL

Zip:*

34950

How long at this address?*

4 years

Telephone Number*

3102108313

If less than two years, provide prior address:

309 South 23rd Street

Are you a citizen of the United States? *

Yes

No

Occupation: *

Retired Army Major of 31 years

Employer:*

Retired

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?

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

No

Finanace/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) *

Completed 31 honorable years in the US Army. Last assigned as a Planner for the Senegalese Army to plan, train, and execute their Army's training with NATO, European Countries, 16 other Western African Countries, and US Forces in preparation for guerrilla forces in the country of Mali. Served 5 terms in Southwest Asia (Iraq, Kuwait and Afghanistan). Two time Bronze Star recipient. Served as Human Resources Manager, Operations Director and Executive Officer of a Battalion.

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 lcx@cityoffortpierce.com.

Upload Resume (Optional)

 No file chosen