



City of Leesburg Appointed Boards & Commission Application

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|--|---|------------|--|--|
| Date: | | Name: | | |
| Mailing Address: | | | | |
| Home Address: | | | | |
| Home Telephone Number | | | | |
| Business Name & Type | | | | |
| | | | | |
| Business Address: | | | | |
| Business Telephone Number: | | | | |
| Position | | | | |
| Education, Training Or Experience Related To The Activities Of The Advisory Body To Which Appointment Is Sought: | | | | |
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| | | | | |
| Professional Organizations/Membership: | | | | |
| | | | | |
| | | | | |
| Have You Served On A City Board Or Committee In The Past? | | | Yes | No |
| If Yes – Dates Served: | | | | |
| Name of Board or Committee: | | | | |
| | | | | |
| | | | | |
| | Library Board | | | Historic Preservation Board |
| | Planning Commission | | | Greater Leesburg CRA |
| | Carver Heights & Vicinity CRA | | | General Employees Retirement Board of Trustees |
| | Fire Department Pension Board of Trustees | | | Police Department Pension Board of Trustees |
| | Other (Specify): | | | |
| I will attend meetings in accordance with the adopted policies of the City of Leesburg. If at any time my business or professional interests conflict with the interests of the Advisory Body, I will not participate in such deliberations. | | | | |
| Signature of Applicant | | Return To: | City Clerk's Office | |
| | | | City of Leesburg P.O. Box 490630 Leesburg, FL 34749-0630 | |