



(Continued from Reverse Side)

**Personal/Professional References:**

<u>Name</u>	<u>Address</u>	<u>Telephone</u>

**Work Experience:**

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**Community Involvement:**

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**Interests/Activities:**

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**Why do you desire to serve on this/these Board(s)?:**

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- **NOTE: A resume or separate sheet with additional information may be included.**

**APPLICANT CERTIFICATION**

**By placing my signature below, I do hereby acknowledge that I understand the following:**

1. This Applicant Information Form, when completed and filed with the City Clerk's Office, is a PUBLIC RECORD under Chapter 119, *Florida Statutes*, and, therefore, is open to public inspection by any person.
2. As an applicant, I am responsible for keeping the information on this form current and that any changes or updates to this form can be made by calling, faxing, writing, or visiting the City Clerk's Office.
3. As an applicant, I am aware that City and State law requires that members of certain boards file a detailed financial disclosure form.
4. This application is effective for ONE YEAR from the date of receipt by the City Clerk's Office. To be eligible for appointment, each member must be a registered voter and resident of the City of Titusville for one year immediately prior to the appointment.
5. Under the provisions of Section 2-52 of the Code of Ordinances, "Persons wishing to be considered for appointments shall file with the City Clerk's Office a statement of their interest and comply with Section 2-51, no later than five (5) days prior to the meeting at which the appointment is scheduled. The time limit in this subsection may be waived when a position on a board or commission has been open or available for appointment for a period of fifteen (15) days and there is only one (1) applicant for the position.
6. The information provided on this form is true and consent is hereby given the City Council or its designated representative to verify any and/or all information provided.

\_\_\_\_\_  
**Applicant Signature and date**

**City Clerk's Office Use Only:**

**Date Application Received:** \_\_\_\_\_

**Receipt Acknowledged By:** \_\_\_\_\_

**RETURN COMPLETED APPLICATIONS TO:** City Clerk's Office, P.O. Box 2806, Titusville, FL 32781-2806 – 321 383-5774