



# BOARD OF COUNTY COMMISSIONERS BOARD / COMMITTEE APPLICATION

FOR TDC ARTS/CULTURAL/HERITAGE FUNDING PANEL

\_\_\_\_\_  
DATE RECEIVED BY ST. JOHNS COUNTY

*Thank you for expressing interest to be considered for appointment to committees, boards, commissions or advisory groups appointed by the St. Johns County Board of County Commissioners. The County Commission appreciates your willingness to serve your fellow citizens in a volunteer capacity. Please complete this application to the best of your ability. (You may attach a resume and/or additional data. Please reference attachments in the appropriate section(s).)*

Name: \_\_\_\_\_ District #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

How long have you been a legal resident of St. Johns County? \_\_\_\_\_

Most recent occupation/employer: \_\_\_\_\_

I am \_\_\_\_\_ am not \_\_\_\_\_ a registered voter in St. Johns County, Florida.

List all active professional licenses and certifications: \_\_\_\_\_

\_\_\_\_\_  
Educational background: \_\_\_\_\_

\_\_\_\_\_  
Past work experience: \_\_\_\_\_

\_\_\_\_\_  
Please list any civic clubs, professional organizations, or public interest groups of which you are a member or in which you have been active: (attach additional sheet, if necessary)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Please indicate, by preference, all County committees, boards, or councils in which you have an interest:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

List three (3) personal or professional references:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Are you currently serving (or have served in the past five years) as an officer or on the Board of Directors of any not-for-profit organizations including civic clubs, professional organizations, community support organizations, visitor attractions, cultural institutions or similar organizations? If so please list below and indicate the dates of your service.

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Please describe any experience, knowledge or skill set in the following areas that you may have:

1. Tourism Marketing:

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2. Tourism Business Operations (including not-for-profit businesses):

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3. Performing or Visual Arts presentations:

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4. Special Event organization and promotions:

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5. Historic interpretations or presentations:

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You may use this space for a brief biographical sketch or to list other skills you possess that are relevant to the appointment you are seeking: (Please indicate in the space below if you attach your resume.)

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All information provided will become a matter of public record and will be open to public inspection. If you require special accommodations because of a disability to participate in the application/selection process, you must notify the Board of County Commissioners in advance. This application will be kept on file for one (1) year, at which time you must notify the Board of County Commissioners of your intent to remain an active applicant and update your application accordingly or it will be removed from the active file.

I hereby authorize St. Johns County or its representatives to verify all information provided and I further authorize the release of any information by those in possession of such information which may be requested by the County. I certify that all information provided herein is true and accurate to the best of my knowledge. I understand that a volunteer position provides for no compensation except that as may be provided by Florida Statutes or other enabling legislation.

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Signature Date

Please return completed application to:  
St. Johns County Board of County Commissioners  
500 San Sebastian View, St. Augustine, FL 32084  
Phone: (904) 209-0300 Fax: (904) 209-0538

***Thank you for your interest!***

**For Office Use Only:**  
Mailed expiration letter: \_\_\_\_\_  
Confirmed interest to extend 6 months:  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

*Revised 03/24/15*