Application for MPO Citizens Advisory Committee

The information provided below will be used by the Planning Commission in considering appointments to the Metropolitan Planning Organization (MPO) Citizen Advisory Committee (CAC).

Applications are public record, and will be kept on file and may be released to the public upon request. The selected appointee will serve for a two-year term, at the will of the Planning Commission, and is expected to (1) regularly attend the CAC meetings, and (2) provide periodic status reports to a designated representative and/or the Planning Commission.

1. Name: _____________________________________________________________
   Last       First       Middle/Maiden

2. Place of Employment: ________________________________________________

   Job Title       Street Address

   P. O. Box       City, State       Zip Code

   Phone #       Fax #       E-mail

3. Residence Address: ___________________________________________________

   Street       Apt. #

   P. O. Box       City, State       Zip Code

   Phone #       Fax #       E-mail

4. Do you prefer to be contacted and to receive delivery of paper and electronic documents at your home or work address? Home_____ Work _____

Please Note: The following information will be used to satisfy Equal Opportunity reporting and research requirements.

5. Gender: Male____ Female____

6. Race: White, non-Hispanic (W)____; Hispanic (H)____; Black (B)____;
   American Indian/Alaskan Native (A)____; Asian/Pacific Islander (P)____

7. Date of Birth ___________________ Place of Birth ______________________

8. Are you a United States citizen? Yes_____ No______
9. Have you ever been convicted of any felony or misdemeanor offense? Is so, please explain. You may omit minor traffic violations and any offense committed as a minor. 

10. Are you a registered voter? Yes____ No____

11. Continuous resident of Hillsborough County since ____________________________

   Note: Hillsborough County residency is mandatory for the appointment.

12. Education:
   A. High School ___________________________ Year Graduated ________
   B. List all post-secondary educational institutions attended:

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<tr>
<th>Name &amp; Location</th>
<th>Dates Attended</th>
<th>Degrees</th>
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13. Have you ever held a professional license or certificate? Yes____ No____

   If “Yes, please provide title, issue date, and issuing authority. If any disciplinary action has been taken, please state the type and date of the action taken.

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<th>License/Certificate Title</th>
<th>Issue Date</th>
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   Disciplinary Action Date(s)

14. State your experience and interest or elements of your personal history that qualify you for appointment.

15. If you are appointed, do you know of any reason whatsoever why you will not be able to attend regularly scheduled meetings or otherwise fulfill the duties of the office to which you have been appointed? Yes____ No____

   If “Yes”, please explain:

16. To your knowledge, have you, members of your immediate family, or businesses of which you or members of your immediate family have been an owner, officer or employee, had contractual or other dealings during the last three (3) years with any Hillsborough County governmental agency, including the agency to which you seek appointment? Yes____ No____

   If “Yes”, please explain:
Business: ____________________________________________
Your Relation to Business: ____________________________________________
Business Relation to Agency: ____________________________________________

17. Please list three persons who have known you well within the past five (5) years. Include current complete address, phone number and the capacity in which they have known you.

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<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>Capacity</th>
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18. Name any business, professional civic or fraternal organizations of which you are a member, and the dates of your membership.

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<thead>
<tr>
<th>Organization</th>
<th>Date of Membership</th>
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The undersigned (1) certifies that the information provided in this application is accurate and complete, (2) understands and acknowledges that the appointment is subject to all requirements of Florida law governing the conduct of public officials, including, without limitation, the Sunshine and Public Records laws, and Florida’s Code of Ethics, and (3) has reviewed the Standards of Conduct adopted by the Planning Commission for the conduct of its members and agrees to conduct himself or herself in a manner consistent with such standards.

Signature of Applicant

Date: ____________________________

Received by Planning Commission

Date: ____________________________

By: ____________________________