



City of Gulfport, Florida  
 2401 53<sup>rd</sup> Street South  
 Gulfport, Florida 33707

## APPLICATION TO SERVE ON CITY BOARDS/COMMITTEES

1. Name \_\_\_\_\_ Home Phone \_\_\_\_\_
2. Home Address \_\_\_\_\_
3. Occupation \_\_\_\_\_
4. Business Address \_\_\_\_\_ Business Phone \_\_\_\_\_
5. Brief Description of Experience \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Are you a registered voter? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Have you been a City resident for six months or longer? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Are you employed by the City? Yes \_\_\_\_\_ No \_\_\_\_\_
9. Do you presently serve on a City Board or Committee? Yes \_\_\_\_\_ No \_\_\_\_\_
10. Do you hold a public office? Yes \_\_\_\_\_ No \_\_\_\_\_
11. Please check each of the Boards or Committees on which you are interested in serving:
 

<input type="checkbox"/> Board of Adjustment*	<input type="checkbox"/> Economic Development Advisory Committee**
<input type="checkbox"/> Planning and Zoning Board/LPA*	<input type="checkbox"/> Historic Preservation Committee
<input type="checkbox"/> Firefighters' Pension Board*	<input type="checkbox"/> Teen Council
<input type="checkbox"/> Police Pension Board*	<input type="checkbox"/> Waterfront Redevelopment Advisory Committee**
<input type="checkbox"/> General Employees' Pension Board*	Resident _____ Business Owner _____
<input type="checkbox"/> Senior Citizens' Advisory Committee	<input type="checkbox"/> Other _____

**\*Financial disclosures forms are required upon appointment to these Boards/Committees.**

**\*\*Applicants must live in the redevelopment district to serve on these Committees.**

12. Why would you like to serve on this Board or Committee and what do you feel you would contribute to it?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Your application will automatically be submitted when vacancies occur. Applications will be kept on file for one year. Please call the City Clerk's Department at 727-893-1012 with any questions.**