



## Application for Appointment

Dear Applicant:

Thank you for your interest in serving on one of the Town of Indian River Shores Boards or Committees. Kindly complete the following application for the Town Council's consideration in their appointment. Please return the completed form to the office of the Town Clerk (JRutan@IRShores.com) or mail to 6001 Highway A1A, Indian River Shores, FL 32963. For additional information on any of the Town's Boards or Committees, please feel free to contact the Town Clerk directly at 772-231-1771, ext. 121.

Date: \_\_\_\_\_ Registered Voter in Indian River County? ☐ Yes ☐ No

Name: \_\_\_\_\_ Preferred Calling Name: \_\_\_\_\_

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

How long have you been a **full time** resident of Indian River Shores? \_\_\_\_\_ years

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (Work) \_\_\_\_\_

\_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Board or Committee Requested	Planning, Zoning and Variance	<i>Maximum limit of 2 terms each</i> 4 year term
	MPO BPAC	2 year term
	Finance Committee	2 year term

Brief statement as to why you wish to serve in this position, board or committee: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Education: ☐ High School ☐ Some College ☐ BA/BS Degree, major in \_\_\_\_\_

☐ Doctorate in \_\_\_\_\_ Year degree(s) received \_\_\_\_\_ <sup>1</sup> \_\_\_\_\_ <sup>2</sup>

Other pertinent training and/or certifications: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Present Occupation: \_\_\_\_\_ Prior Occupation: \_\_\_\_\_

Licenses or Certifications: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Applicable Experience: (Organization, city/state, title/duties) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please provide at least two references (*names and phone numbers*) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Received