



CITY OF FORT PIERCE

100 NORTH U.S. #1
FORT PIERCE, FLORIDA 34950

APPLICATION FOR APPOINTMENT/REAPPOINTMENT

_____ Board

Name: _____

Phone: _____

Address: _____

Zip Code: _____

Occupation: _____ Are you a citizen of the United States? _____

Do you own a business that operates within the City of Fort Pierce? _____

If yes, list the address, and nature of said business: _____

Do you now or in the future plan to do business with the City of Fort Pierce? _____ If yes, in what capacity? _____

Are you employed by a business that is located within the City of Fort Pierce? _____

If yes, state the business and location: _____

Do you have special training or knowledge in the area of:

Architecture _____ Engineering _____ Real Estate Brokering _____

Contracting _____ Land Development _____ Other areas: _____

Describe your education, background, training and knowledge in the above areas.

Have you ever been convicted of a crime? Yes _____ No _____ If yes, what is the nature of the crime(s) you were convicted of: _____

Date: _____

Signature _____

Referred by :