

Personal Info

First Name* Robert

Middle Initial B

Last Name* Farrer

Email Address* rbfarrer@msn.com

Primary Phone* 503-449-8267
(Example: (123) 456-7890)

Length of Residency* If not a resident of Clearwater, select "Not a Resident"
1-5 Years

Business Owner?* Do You Own or Represent a Business in Clearwater?
 Yes No

Home Address

Street Address* 3359 Wind Chime Drive

City* Clearwater

Zip Code* 33761

Education & Work

Highest Level of Education Bachelor's degree

Occupation If retired, enter former occupation
Financial Advisor

Employer Merrill Lynch

Relevant Work Experience Financial training, experience and relevant interactions with all types of people.

Community Activities President and Board Chair of Easter Seals Oregon and Kentucky Easter Seal Society covering over 25 years of volunteering.

Board Service* Have you served or do you serve on a board in Clearwater?
 Yes No

Attachments

Voter Registration *

image.jpg

2.27MB

File types accepted: pdf, tif, tiff, jpeg, jpg, gif, doc, docx, rtf, png. 10 MB max file size.

One of the boards selected requires the upload of your voter registration. This will satisfy the proof of residency for any other boards selected.

Please refer to the [City of Clearwater Advisory Boards listing](#) for requirements and please attach a copy of one of the following documents:

- Current voter registration within city limits
- Valid current Florida Driver License issued to an address within city limits
- Declaration of Domicile filed with the city clerk affirming residency within city limits

Proof of Residency

File types accepted: pdf, tif, tiff, jpeg, jpg, gif, doc, docx, rtf, png. 10 MB max file size.

Questionnaire

Question 1. What is your understanding of the duties and responsibilities of the Board(s)?

Answer 1. * To diligently assess, research, discuss and act on the facts presented as fairly as possible according to the instructions and charter of each committee.

Question 2. Have you ever observed a board meeting either in person or on C-View, the City's TV station?

Answer 2. * Yes No

Question 3. What background, experience, or education qualifies you to serve on the Board(s)?

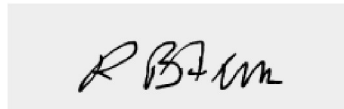
Answer 3. * A broad educational experience and a working life devoted to making good decisions that fit the formula of excellence and fairness.

Question 4. Why do you want to serve on the Board(s)?

Answer 4. * I have the time, experience and patience to want to reach out to volunteer for my community. This would be a good way for me to do so.

Date * 10/28/2020

Signature *

A handwritten signature in black ink on a light gray rectangular background. The signature appears to be "R B T M".

Checkbox choice 1
 choice 2
 choice 3

Checkbox choice 1
 choice 2
 choice 3

Drop-down choice 1

Radio Button choice 1
 choice 2
 choice 3