## **Application for Advisory Boards**



## **Board Selection**

Please refer to the City of Clearwater Advisory Boards listing for requirements.

You will need to upload at least one of the following:

- 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

Boards Library Board

## Personal Info Timothy First Name \* Middle Initial Last Name \* Promen Email Address\* tothylegs2@gmail.com (727) 215-3016 Primary Phone \* (Example: (123) 456-7890) Length of Residency\* If not a resident of Clearwater, select "Not a Resident" 6+ Years Business Owner?\* Do You Own or Represent a Business in Clearwater? C Yes © No Home Address Street Address\* 309 S Mars Ave, Apt 1 City\* Clearwater Zip Code \* 33755

## Education & Work

Highest Level of Education Bachelor's degree

Occupation If retired, enter former occupation

Landscape Architect

Employer The Promen Company

Relevant Work Experience Management

Community Activities

Board Service \* Have you served or do you serve on a board in Clearwater?

C Yes € No

lease refer to the City o	f Clearwater Advisory Boards listing for requirements and please attach a copy of one of the following documents:	
<ul> <li>Current voter registration within city limits</li> <li>Valid current Florida Driver License issued to an address within city limits</li> <li>Declaration of Domicile filed with the city clerk affirming residency within city limits</li> </ul>		
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.*	Health Safety and Welfare	
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.*	Community Development	
Question 4. Why do you want to serve on the Board(s)?		
Answer 4.*	Ensure Reading	
Date *	11/12/2020	
Signature *	Timothy Promen	
Checkbox	□ choice 1 □ choice 2 □ choice 3	
Checkbox	□ choice 1 □ choice 2 □ choice 3	
Drop-down		
Radio Button	C choice 1 C choice 2 C choice 3	