

## CITY OF CALLAWAY ADVISORY BOARD APPLICATION

OFFICE OF THE CITY CLERK 6601 EAST HIGHWAY 22 CALLAWAY, FL 32404 TELEPHONE: (850) 215-6694 WEB: WWW.CITYOFCALLAWAY.COM

**□NEW APPLICATION □ RE-APPLICATION** AUDIT COMMITTEE\* (5 Members – 4 Citizens for 3-Year Terms, and 1 Commissioner for 2-year Terms) HALF CENT SALES SURTAX OVERSIGHT COMMITTEE (3-Year Terms; 5 Members) ☐ PLANNING BOARD\* (3-Year Terms; 7 Members) ☐ OTHER: \_\_\_\_\_ Name: \_\_\_\_\_ (Last) (First) (Middle) Address: Mailing Address (if different): Business Address: Occupation: Home/Cell Ph.:\_\_\_\_\_ Work Ph.:\_\_\_\_ E-mail: Do you reside within the City limits?  $\square$  Yes  $\square$  No • If yes, how long have you resided in the City of Callaway? Do you own property in the City of Callaway? ☐ Yes ☐ No Are you a Registered Voter in Bay County? Yes No Voter ID#: 1. \_\_\_\_\_\_ Please rank your board preference(s):

before? ☐ Yes ☐ No If ye	teer board or in a volunteer capacity with the C s, please indicate name of board and dates of se	ervice:
Why would you like to serve on	this board?	
What special skills would you br	ing to this position?	
	nce:	
List any licenses and/or degrees	(location and year):	
2		
	the meeting dates and times for the board/agend If yes, please explain:	
Signed:	Date:	
SCI	HEDULE OF BOARD MEETINGS	
Audit Committee* Half Cent Surtax Committee Planning Board*	As Needed 3 <sup>rd</sup> THURS March & October 1 <sup>st</sup> & 3 <sup>rd</sup> TUES of each Month as needed	TBD 6:00 p.m. 6:00 p.m.
*These boards are subject to Fine	ancial Disclosure	

### Submit application to:

Ashley Robyck, City Clerk City of Callaway 6601 E. Highway 22 Callaway, FL 32404

<sup>\*</sup>These boards are subject to Financial Disclosure.

### CITY OF CALLAWAY ADVISORY BOARD MEMBER APPLICATION

# AUTHORIZATION FOR CRIMINAL BACKGROUND HISTORY INFORMATION & BACKGROUND/REFERENCE CHECK

#### Acknowledgments

- 1. <u>Accuracy of Information</u>. I certify that the information provided in my Board Application with the City of Callaway is correct to the best of my knowledge.
- 2. <u>Information Release</u>. I authorize the City of Callaway to contact any company, institution, or individual it deems appropriate to investigate my criminal background history, character, qualifications, or related information. I give my full consent for all contacted persons to provide the information concerning this application. Further, I waive my right to bring a claim against these individuals for any damages arising from furnishing the requested information to the City of Callaway. I also release the City of Callaway from all liability that might result from checking such references.

THE FOLLOWING INFORMATION IS NEEDED FOR THE CITY TO PERFORM A CRIMINAL BACKGROUND HISTORY:

Applicant:			
Last		First	Middle
Date of Birth:		*SSN:	
Race: (Circle One)	African American	Alaskan Native	American Indian
	Asian	Caucasian	Hispanic
	Unknown	Other:	
Gender: (Circle One) Female		Male	
**Are vou disabled?	: Yes	No	

\*Note: Per Florida Statutes, your SSN is exempt from Public Records and will be redacted from this form immediately following your background check. Further, this form will not be made public unless requested via a Public Records Request.

<sup>\*\*</sup>This does not affect whether you are appointed or not. We are required to submit to the State an annual report of appointed Minority & Disabled members of our boards. Not in name, just statistics.

#### **GENERAL INFORMATION**

#### SUNSHINE AMENDMENT/CODE OF ETHICS

All Volunteer Advisory Board/Committee Appointees are governed by and subject to the Florida Sunshine Law, which includes the Public Records Law and Code of Ethics. [Ref. Sec. 24, Art. I, F.C., Sec 286.011, F.S. Chap. 119, F.S. and Chap. 112 – Part III, F.S. respectively]

#### FORM 1 – STATEMENT OF FINANCIAL INTERESTS

Persons required to file FORM 1 include all <u>local officers</u>. A local officer is defined as any appointed member of a board, excluding any member of a solely advisory body. However, a governmental body with land-planning, zoning or natural resources responsibilities shall not be considered an advisory body and therefore would be required to file.

Within 30 days from the date of appointment, and subsequently no later than July 1<sup>st</sup> of each year thereafter, a local officer shall file a statement of financial interests with the Bay County Supervisor of Elections. Additionally, within 60 days of leaving the position, unless you take another "reporting position" within that period of time you are required to file a FORM 1F with the Bay County Supervisor of Elections. [Ref. Sec. 112.3145, F.S.]

REPORTING REQUIREMENTS AND PROHIBITED RECEIPT OF GIFTS; SOLICITATION AND DISCLOSURE OF GIFTS FROM GOVERNMENTAL ENTITIES, DIRECT SUPPORT ORGANIZATIONS AND HONORARIUM RELATED EXPENSES

Certain instances require disclosure of gift and honoraria. For a full detail of requirements, please review the **GIFT LAW** as identified in Florida Statutes or contact the City Attorney for specifics.
[Ref. Secs. 112-3148 & 49, F.S.]

NOTE: Forms which may be required to be filed by a local officer are as referenced in Florida Commission on Ethics' "GUIDE TO THE SUNSHINE AMENDMENT AND CODE OF ETHICS FOR PUBLIC OFFICERS AND EMPLOYEES" booklet, as published annually and on file in the Office of the City Clerk or online at the Florida Commission on Ethics at <a href="https://www.ethics.state.fl.us">www.ethics.state.fl.us</a> under the tab entitles Publications and/or Forms.