

ADVISORY COMMITTEE APPLICATION FOR BOARD APPOINTMENT

<p>It is the applicant's responsibility to keep the information on this form current. To advise the County of any changes please contact Christine Coble by telephone at 606-5300 or by e-mail at CobleC@leoncountyfl.gov</p> <p style="text-align: center;">Applications will be discarded if no appointment is made after two years.</p>	
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Name: Regina Rice	Date: 9/14/2009
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Home Phone: 850-402-3013	Work Phone: 850-245-3490	Email: regina.rice@vr.fldoe.org
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Occupation: Counselor	Employer: State of Florida
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Please check box for preferred mailing address.

Work Address:

City/State/Zip:

Home Address: 9525 Barwick Drive

City/State/Zip: Tallahassee, Florida 32305

Do you live in Leon County? Yes No If yes, do you live within the City limits? Yes No

Do you own property in Leon County? Yes No If yes, is it located within the City limits? Yes No

For how many years have you lived and/or owned property in Leon County? 10 years

Are you interested in serving on any specific Committee(s)? If yes, please indicate your preference

1st Choice: Charter Review 2nd Choice: _____

If not interested in any specific Committee(s), are you interested in a specific subject matter? If yes, please check those areas in which you are interested, or describe other areas not listed:

Human Services Housing Health Care Science Library Services Growth Management
 Tourist Development Transportation Bicycle/Pedestrian Parks & Recreation
 Code Enforcement
 Other Areas _____

Have you served on any previous Leon County committees? Yes No

If Yes, on what Committee(s) have you served? _____

How many days per month would you be willing to commit for Committee work? 1 2 3 4 or more

And for how many months would you be willing to commit that amount of time? 2 3 to 5 6 or more

What time of day would be best for you to attend Committee meetings? Day Night

(OPTIONAL) Leon County strives to meet its goals, and those contained in various federal and state laws, of maintaining a membership in its Advisory Committees that reflects the diversity of the community. Although strictly optional for Applicant, the following information is needed to meet reporting requirements and attain those goals.

Race: Caucasian African American Hispanic Asian Other
Sex: Male Female Age: 35 Disabled? Yes No

Persons needing a special accommodation to participate in an Advisory Committee should contact Christine Coble by telephone at 606-5300 or e-mail at CobleC@mail.co.leon.fl.us

In the space below briefly describe or list the following: any previous experience on other Committees; your educational background; your skills and experience you could contribute to a Committee; any of your professional licenses and/or designations and indicate how long you have held them and whether they are effective in Leon County; any charitable or community activities in which you participate; and reasons for your choice of the Committee indicated on this Application. Please attach your resume, if one is available.

I've been a member of the Leon County Community for about 10 years now. I have a Master's degree in Rehabilitation Counseling which is effective in Leon County. I am a member of the United States Navy Reserve and I've served as a mentor with Leon County Schools and intend to serve in that capacity again this year. While I've not served on any committees in the past, I follow state and local government closely and want what is best for my community. I've selected human services and bicycle/pedestrian as the committees that are of most interest to me but I am willing to serve on any committee that you feel I can be of assistance.

References (you must provide at least one personal reference who is not a family member):

Name: Mary Cilek Telephone: 850-87-8718
Address: 1383 Devonshire Drive, Tallahassee, Fl 32317

Name: Maryann Kearsley Telephone: 850-224-8259
Address: 510 Oakland Avenue, Tallahassee, Fl 32301

IMPORTANT LEGAL REQUIREMENTS FOR ADVISORY COMMITTEE MEMBERSHIP
AS A MEMBER OF AN ADVISORY COMMITTEE, YOU WILL BE OBLIGATED TO FOLLOW ANY APPLICABLE LAWS REGARDING GOVERNMENT-IN-THE-SUNSHINE, CODE OF ETHICS FOR PUBLIC OFFICERS, AND PUBLIC RECORDS DISCLOSURE. THE CONSEQUENCES OF VIOLATING THESE APPLICABLE LAWS INCLUDE CRIMINAL PENALTIES, CIVIL FINES, AND THE VOIDING OF ANY COMMITTEE ACTION AND OF ANY SUBSEQUENT ACTION BY THE BOARD OF COUNTY COMMISSIONERS. IN ORDER TO BE FAMILIAR WITH THESE LAWS AND TO ASSIST YOU IN ANSWERING THE QUESTIONS BELOW, YOU MUST COMPLETE AN ORIENTATION BEFORE YOUR APPLICATION IS DEEMED COMPLETE.

Have you completed the Orientation? Yes No
Are you willing to complete a financial disclosure form, if applicable? Yes No
Will you be receiving any compensation that is expected to influence your vote, action, or participation on a Committee? Yes No If yes, from whom? _____
Do you anticipate that you would be a stakeholder with regard to your participation on a Committee? Yes No
Do you know of any circumstances that would result in you having to abstain from voting on a Committee due to voting conflicts? Yes No If yes, please explain _____
Do you or your employer, or your wife or child or their employers, do business with Leon County? Yes No
If yes, please explain _____

This should read spouse (not wife)

Do you have any employment or contractual relationship with Leon County that would create a continuing or frequently recurring conflict with regard to your participation on a Committee? 9 Yes 9 No
If yes, please explain _____

All statements and information provided in this application are true to the best of my knowledge.

Signature: Regina Rice _____

Please return Application to
Christine Coble, Agenda Coordinator
Leon County Board of County Commissioners
301 South Monroe Street
Tallahassee, FL 32301