

CITY OF ROCKLEDGE  
APPLICATION FOR BOARD / COMMITTEE MEMBERSHIP  
(Please Print Legibly)

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employer or Business: \_\_\_\_\_

Title/Position Held: \_\_\_\_\_

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VARIOUS CITY BOARDS / COMMITTEES AVAILABLE  
(One Preference per Application; Check Appropriate Box)

- |                          |  |                          |   |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | Board of Adjustment                      | <input type="checkbox"/> | Code Enforcement Board                        |
| <input type="checkbox"/> | Board of Adjustment & Appeals            | <input type="checkbox"/> | Education Advisory Committee                  |
| <input type="checkbox"/> | Business Development Committee           | <input type="checkbox"/> | Planning Commission                           |
| <input type="checkbox"/> | Citizens Advisory Committee, Brevard MPO | <input type="checkbox"/> | Retirement Committee, Fire Employees          |
| <input type="checkbox"/> | Community Redevelopment Agency           | <input type="checkbox"/> | Retirement Committee, General Employees       |
| <input type="checkbox"/> | Board of Commissioners                   | <input type="checkbox"/> | Retirement Committee, Police Employees        |
| <input type="checkbox"/> | Citizens Recreation Advisory Board       | <input type="checkbox"/> | The Rockledge Environmental Enhancement Board |

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MISCELLANEOUS INFORMATION  
(Answer "Yes" or "No" where indicated)

Are you currently serving on any other City Board(s) or Committee(s)? \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

Are you a resident of Rockledge? \_\_\_\_\_

If yes, how long? \_\_\_\_\_

Are you a homeowner in Rockledge? \_\_\_\_\_

Registered to vote in Rockledge? \_\_\_\_\_

Are you engaged in a business in Rockledge? \_\_\_\_\_

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Please provide qualifications, experience and background that you feel would be beneficial to the board or committee selected (if necessary, continue on reverse side or additional sheet):

**Note:** Application will be kept on file for a period of two (2) years. Periodic telephone calls will be placed to inquire into your interest in appointment to the selected board or committee before submittal to the City Council.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_