Staff Use Only:						
Council District	This application is a	Reappointment	New Appointment			

GREENVILLE COUNTY BOARDS AND COMMISSIONS APPLICATION

Disabilities and Special Need	
(Name of Board or Commission to which y	
An individual may only apply to serve on one board or comr	nission during any election cycle.
In order for your application to be given consideration, it is critical that as completely as possible.	
X Mr Mrs Ms Miss Name David W. Gorman	
Home Address 312 Portabello Way City	Simpsonville
Zip 29681	Work Phone (301) 651-7223
Voter Registration Number 5816061	Email dgorman@davmail.org
**You must be registered to vote in Greenville County at the time of application	n
Occupation Chief Operatiojns Officer (Retired)	
Employer Disabled American Veterans	
EmployerAddress 807 Maine Ave., SW Washington, DC 20024	
Washington, Do 20021	
Volunteer Experience	
Over forty (40) yeers working with disabled veterans in a multitude of ways from	simple administrative functions to
patient related care activities. Also, volunteered extensively in disabled sports a	ctivities.
Tutor, mainly reding, with pre-school special needs to fourth grade children, and	other classroom and fund raising
activities.	
Do you currently hold any elected or appointed office or commission	_ No
If yes, list	.
Have you previously held any elected or appointed office or commission?	No
If yes, list	
-	

Have you ever been fined for any ethics violations?							
If so, please comment							
	Inding of the role of a member of the board						
To identify, empirically and by hands on experience with the community at large, the issues facing the Board's constituency and proactively, with understanding and compassion, addressing them to find a solution to the issue(s) tht benefits the							
effected individual(s) as			. ,				
	· · ·						
Have you ever attended	I a meeting of this board or commission?		Yes	X No			
Are you available to me of the board or commis	•	X Yes	No				
If appointed, will you pl	edge to faithfully attend the meetings?		X Yes	No			
How many hours/week	are you available to give to this board of c	ommisission?	A	s require			
-	you believe you could contribute as a men						
-	pilateral leg amputee,Vietnam Veteran emplo						
	f working with the disabled community, and the						
	believe the adage of giving a hand up not a h						
	team concept to identify programs that will go						
·							
Highest Degree Earned							
School Attended	Attleboro HS, MA						
Field Of Study							
Do you have expertise	n any of the following areas (check all that	t apply).					
	Tauriam Industri	Archite	actural				
	Tourism Industry	\vdash	otection Eng /				
	Cultural / Arts	Contra	_				
	Restaurant	□ Electri	cal Engineer /				
	Hotel Management	Contra	_				
		□ Design	n/Architectural	1			
		1 1 -	sional Contrac				
		C Strict	ural Engineer	ı			
		Contra	_	1			
		Mecha Contra	anical Enginee	r/			
		Plumb	oing Engineer actor	l			

Have you ever been convicted of a c violation? If so, please give de		Yes	X No			
Are you current in payment of Green	nville County property taxes?	Yes	X No			
Do you reside in a municipality?	If so, please name.	Yes	X No			
	<u>Statement</u>					
neccessary time to carry out to	will require substantial effort on my p ne responsibilities and requirements of esult in me receiving any compensati	of the positions. I furthe				
Signature		Date				
Recommended by						
Please return completed form to:						

Greenville County Council 301 University Ridge, Suite 2400 Greenville, SC 29601-3665

If you have questions, please call 467-7115 or check the www.greenvillecounty.org website.