

Have you ever been fined for any ethics violations? No

If so, please comment

Describe your understanding of the role of a member of the board or commission to which you are applying
Oversight of commission activities which provides treatment and prevention services for the Upstate Community.

Have you ever attended a meeting of this board or commission? Yes No

Are you available to meet at the regularly scheduled date and time of the board or commission meeting? Yes No

If appointed, will you pledge to faithfully attend the meetings? Yes No

How many hours/week are you available to give to this board of commission? 5 hours

What specific skills do you believe you could contribute as a member of this board or commission? _____

17 years experience working with individuals in the addiction and recovery field.

Highest Degree Earned Associates in Business Administration

School Attended Dunbar High School/Greenville Tech

Field Of Study Business

Do you have expertise in any of the following areas (check all that apply).

- | | |
|---|---|
| <input type="checkbox"/> Tourism Industry | <input type="checkbox"/> Architectural |
| <input type="checkbox"/> Cultural / Arts | <input type="checkbox"/> Fire Protection Eng / Contractor |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Electrical Engineer / Contractor |
| <input type="checkbox"/> Hotel Management | <input type="checkbox"/> Design/Architectural / Professional Contractor |
| | <input type="checkbox"/> Structural Engineer / Contractor |
| | <input type="checkbox"/> Mechanical Engineer / Contractor |
| | <input type="checkbox"/> Plumbing Engineer / Contractor |

Have you ever been convicted of a crime other than a minor traffic violation? If so, please give details

Yes No

Are you current in payment of Greenville County property taxes?

Yes No

Do you reside in a municipality? If so, please name.

Yes No

Do you, any member of your family or a business with which you or a member of your family is associated, provide goods and/or services to this board for payment?

Yes No

Statement

By my signature, I state that all information contained in this application is true and accurate to the best of my knowledge.

I understand it is my responsibility to insure my application is submitted within the application period and that it has been received by the County Council Office.

I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.

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.