Staff Use Only:						
Council District	_17	This application is a	Reappointment	X New Appointment		

	planning						
	(Name of Board or Commission to which you are applying						
An individual may only apply to serve on one board or commission during any election cycle.							
In ord	er for your application to be given consideration, it is critical that you answer all of the following questions as completely as possible.						
X Mr	Mrs Ms Name Dr. John M. Liston						
Home Address	620 Gum Springs Road City Taylors						
**You must be	registered to vote in Greenville County at the time of application						
Occupation	Ret. School Supt.						
Employer	South Carolina						
Employer Addr							
EmployerAddr							
Highest Degree							
School Attende	d Wofford College						
	ed vollord college						
Field Of Study	Education						
_	Education						
Volunteer Expe	Education						
Volunteer Expe	Education						
Volunteer Expe Church Community Ser	Education Prience vice Clubs						
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How many hours/week are you available to give to this board of commissission?		Unlimit	ed	
Have you ever attended a meeting of this board or commission?		Yes	X	No
Are you available to meet at the regularly scheduled date and time of the board or commission meeting?	x	Yes		No
Do you, any member of your immediate family, or a business with which you or a family member is associated, provide goods and/or services to this board for payment?		Yes	x	No
Do you or any member of your immediate family receive direct services from this board?		Yes	х	No
Have you ever been convicted of a crime other than a minor traffic violation? If so, please give details		Yes	x	No
Do you <u>currently</u> hold any elected or appointed office or commission?		No		
If yes, list	-			
Have you <u>previously</u> held any elected or appointed office or commission?				Yes
If yes, list Greenville Co. Recreation Commission				
Have you ever been fined for any ethics violations? No No				
Have you ever been subject to penalty relating to a violation of State ethics standards If so, please explain	s?		No	
				_
				_
Are you current in payment of Greenville County property taxes?	х	Yes		No

If applying for the <u>Accomidations Tax Advisory Committee</u> the <u>Construction Board of Appeals</u> or the <u>Historic Preservation Commission</u> please check the box that applies to your field of employment or expertise:

Accommodations Tax Comm.	Construction Board of Appeals				
Tourism Industry	Architectural				
Cultural / Arts	Fire Protection Eng / Contractor				
Restaurant	Electrical Engineer / Contractor				
Hotel Management	Design/Architectural / Professional Contractor				
	Structural Engineer / Contractor				
Historic Preservation Comm.	Mechanical Engineer / Contractor				
Archeologist	Plumbing Engineer / Contractor				
Historian					
Architect					
Member of Historic Preservation Group					
<u>Statement</u>					
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 a and that it has been received by the County Coun	pplication is submitted within the application period cil Office.				
I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.					
I understand my lack of attendance resulting in three consecutive meetings or 25% of all meetings within a year may result in my removal from the board.					
Signature	Date				

Please return completed form by mail, fax or email to:

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

Fax: (864) 467-7358

rmccaskill@greenvillecounty.org

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