Staff Use Only:						
Council District	23	This application is a	Reappointment	X New Appointment		

Parks, Recreation	ı, and Tourism Advisory Board
(Name of Board or Com	nmission to which you are applying
An individual may only apply to serve on	one board or commission during any election cycle.
	tion, it is critical that you answer all of the following questions pletely as possible.
Mr X Mrs Ms Miss Name Tina	Belge
ome Address 107 Somerset St.	City Greenville
*You must be registered to vote in Greenville County at the eccupation Assoc. Community Development Planner	e time of application
mployer GCRA	
mployerAddress 301 University Ridge, Suite 2500	
Greenville, SC 29601	
ighest Degree Earned Bachelor of Science	
chool Attended Georgia Southern University	
ield Of Study Public Relations	
olunteer Experience	
-	through United Way for the past 2 years, assisting hundreds of
	a member of the young philanthropists group that volunteers &
	for the City of Greenville for the past 1.5 years through various city
vents such as Fall for Greenville, Artisphere, the Christmas Pa	
escribe your understanding of the role of a member of the	board or commission to which you are applying
s a member of the board I would serve as a representative of	the county's citizenry first and foremost, attending meetings and
eing educated by the staff about park developments, acquisiti	ons, operations, etc. giving my undivided attention and feedback.
d also be a liaison for the County Council and County Adminis	strator and serve as a promoter of the Parks, Recreation, and
ourism department.	
s an avid bicyclist & user of County Parks and Recreation are	eas I believe I could be an advisory board member who'd be able to
s an avid bicyclist & user of County Parks and Recreation are ee and enjoy firsthand park developments. Additionally, through	eas I believe I could be an advisory board member who'd be able to gh my work I have an interest in and background in development,
ee and enjoy firsthand park developments. Additionally, throu	eas I believe I could be an advisory board member who'd be able to

How many hours/week are you available to give to this board of commissission?		8		
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	x	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?				No
If yes, list				
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 standard If so, please explain	ds?		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.