Staff Use Only:						
Council District	18	This application is a	Reappointment	X New Appointment		
			Attendance Record:			

	Theira Unatata
	Thrive Upstate (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 orde	r for your application to be given consideration, it is critical that you answer all of the following question as completely as possible.
Mr X	Mrs Ms Name Christy Bright
ome Address	806 Mary Grove Lane City Greer
You must be r	registered to vote in Greenville County at the time of application
	Stay @ home mother
mployer	None
mployerAddres	806 Mary Grove Lane
ghest Degree I	Earned Bachelor of Arts
chool Attended	Bob Jones Universtiy
eld Of Study	Humanities
olunteer Experi	ience
-	children have/are going to. I have helped in the classroom w/ the children,parades @ the school, playground
uty, running pro	grams, helped out in the office.
a camp I have	helped in the kitchen, with the kids around the camp, snack shop and store.
nave also helpe	d out w/ the elderly. Taking them to doctor appointments, chemo treatments, fixing them meals and cleaning
r them.	
escribe vour u	nderstanding of the role of a member of the board or commission to which you are applying
	ails helping those w/ disabilities and special needs. To help those who cannot always help themselves. To
ow them service	es they can be receiving and using. To help them w/ opportunities.
hat specific sk	ills do you believe you could contribute as a member of this board or commission?
-	uld bring to this board is that of a mother who knows what it is like to live day to day with a special needs child
nave worked wit	th my child for 10 years. I know the struggles of caretakers. The amount of time you spend on a daily basis
	th my child for 10 years. I know the struggles of caretakers. The amount of time you spend on a daily basis octor appointments, and working with insurance companies. I work on a daily basis with helping my child

How many hours/week are you available to give to this board of commissission?	20		
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? If so, please explain			
,			
Have you ever been subject to penalty relating to a violation of State ethics standa If so, please explain	ırds?	No	
Are you current in payment of Greenville County property taxes?	X Yes	No 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 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.					
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.