JIM O'BRIEN



ROBERT SMITH

CLERK DOROTHY BURKHALTER

614 MAIN STREET, WINDERMERE, FL 34786 OFFICE: (407) 876-2563 FAX: (407) 876-0103

COMMITTEE MEMBER APPLICATION FORM

I. Name:	Phone:
2. Home Address:	Windermere, FL 34786
2. Home Address: B 3. Business: B	Business Phone:
4. Business Address:	
5. Email:	
6. Brief Summary of Education and Exp	erience:
7. Are you a U.S. Citizen?	Yes No
8. Are you a registered voter?	Yes No
9. Resident of the Town for 6 Months or	
10. Do you hold public office?	Yes No
11. Are you employed by the Town?	Yes No
12. Do you now serve on a Town Board	
13. Indicate which Board(s) or Committ	
Downtown Business Comm Historical Preservation Committee _	Development Review Board nittee Elders Committee _ Long Range Planning Committee tee Windermere Tree Board
14. Why do you think you are qualified	to serve on this board?
*FINANCIAL DISCLOSURE FORMS MAY B	E REQUIRED FOLLOWING APPOINTMENT
Signature:	Date:
Note: If you have any questions, please c	all the Town Clerk at (407) 876-2563 ext. 53: