



TEEN BOARD APPLICATION

___ LIBRARY BOARD (MUST BE RESIDENT FOR 1 YEAR)

___ PARKS AND RECREATION ADVISORY BOARD (MUST BE A RESIDENT)

NAME _____

ADDRESS _____

HOME PHONE _____ CELL PHONE _____

SCHOOL ATTENDING _____ GRADE _____

ARE YOU A RESIDENT OF CITY OF PINELLAS PARK? _____ IF YES, FOR HOW LONG? _____

DO YOU SERVE ON A CITY BOARD? _____ IF YES, BOARD NAME _____

ARE YOU AVAILABLE FOR DAY MEETINGS? _____ ARE YOU AVAILABLE FOR NIGHT MEETINGS? _____

PLEASE LIST ANY RELATIVES THAT WORK FOR PINELLAS PARK _____

HAVE YOU EVER QUALIFIED FOR A "PROTECTED ADDRESS" STATUS UNDER FLORIDA STATUTE 119? _____

IF YES, QUALIFYING STATUS _____

ORGANIZATIONAL MEMBERSHIPS (FULL NAME) _____

INTERESTS _____

CLUBS, SPORTS, ACTIVITIES _____

SIGNATURE _____ DATE: _____

*****ALL APPLICATIONS MUST BE SUBMITTED TO THE CITY CLERK'S OFFICE*****
THIS APPLICATION WILL BE KEPT ON FILE FOR A PERIOD OF ONE (1) YEAR

