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| Thank you for your interest in serving Lee County. Complete and submit this application, and any supporting documentation, to be considered for a Lee County advisory board or committee appointment. Applications must be complete and signed to be valid. Applications will not be processed unless each section has been completed. Section IV. Conflict of Interest must be completed by all applicants, new and reappointed. |
| Return completed application to: |
| Regular Mail: | Lee County AdministrationAdvisory Committees P.O. Box 398Fort Myers, FL 33902-0398 | Fax:  | (239) 485-2262 |
| E-mail: | advisorycommittees@leegov.com |
| **Note:** All information contained in this application becomes Public Record once submitted to Lee County. |
| **[ ] Go Paperless:**  I agree to receive communications concerning my membership via e-mail. |

1. Name of Advisory Committee You are Applying for:

*Find current or upcoming vacancies on the Lee County website- www.leegov.com/bocc/advisorycommittees*

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| **Committee:** |
| **Commission District:** |
| [ ] | 1 – Ruane | [ ] | 2 – Pendergrass | [ ] | 3 – Sandelli |  [ ] |  4 – Hamman |  [ ] | 5 – Greenwell |

1. Personal Information

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Title:** | [ ] | Mr. | [ ] | Mrs. | [ ] | Ms. | [ ] | Other:  |
| **Name:** |
|  Last | First | Middle Initial |
| **Home Address:** |
|  Street | City | Zip Code |
| **Business Address:** |
|  Street | City | Zip Code |
| **Mailing Address:** |
|  Street | City | Zip Code |
| **Phone:** |
|  Home | Cell | Business |
| **E-mail Address:** |
| **Employer Address:** |
|  Street | City | Zip Code |
| **Employer Phone:** |
| Do you have any family members currently serving on this Advisory Committee? If ‘Yes’, list below. | [ ] Yes | [ ] No |
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| Do you, or anyone in your immediate family, have any business or contractual relationships with the County? If ‘Yes’, explain the relationship and, if applicable, identify the family relationship (mother, father, son, daughter, etc.) | [ ] Yes | [ ] No |
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| Have you ever been convicted of any felony or misdemeanor offense? If ‘Yes’, explain below (You may omit minor traffic violations & any offense committed as a minor.) | [ ] Yes | [ ] No |
|  |
| Have you ever worked for the Lee County Board of County Commissioners? If ‘Yes’, list position, department, start & end date. | [ ] Yes | [ ] No |
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| Do you have any relatives currently working for the Lee County Board of County Commissioners? If ‘Yes’, list name(s) & department(s). | [ ] Yes | [ ] No |
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1. Qualifications

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| **For Domestic Animal Services Advisory Committee Only** |
| Select the category you are interested in representing: |
| [ ] | Animal Breeder | [ ] | Animal Advocate/Rescue | [ ] | Cattlemen’s Association |
| [ ] | Service Animal Industry | [ ] | Licensed/Practicing Veterinarian |

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| List special qualifications to be eligible (for all committees): |
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If applicable, attach a resume of additional personal and professional qualifications and experience.

1. Conflict of Interest

Florida law prohibits certain business relationships on the part of public officers and employees, including those serving on advisory boards and committees. In general, advisory committee members are prohibited from entering into business transactions with Lee County, including contracts or transactions between Lee County government and you, your employer, or any business in which you have a material interest. Consult the *Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees* for assistance in answering the questions below. This guide can be found on the Florida Commission on Ethics website - https://ethics.state.fl.us/PublicInformation/Publications.aspx.

**All applicants, new or reappointment, must fill out this section and submit with the application.**

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| **Advisory Committee:** |
| **Appointed by:** |
| **Name:** | **Phone:** |
| **Mailing Address:** |
|  Street | City | Zip Code |
| **Email:** |
| **Employer/ Business:** |
| **Employer Address:** |
|  Street | City | Zip Code |

See page 5 of this application for information on Prohibited Employment and Business Relationships. If you have questions about a potential conflict, contact the Lee County Attorney’s Office at (239) 533-2236.

**Are you aware of a potential conflict of interest that may result from your service as a member of a Lee County advisory committee? [ ] Yes [ ] No**

If yes, explain the nature of the conflict of interest. Identify contracts or business transactions you have with the County, the position you hold with your employer if your employer has a contract or business relationship with the County, identify the business entity you own or have a material interest in, and any other information necessary to explain the nature of the conflict of interest:

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If you have a potential conflict but think that one of the statutory exemptions applies to your situation, indicate the specific exemption (see Section 112.313(12), Florida Statutes):

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**Waiver of Conflicts of Interest:** A member of an advisory board or committee may have a conflict of interest waived by the Board of County Commissioners. Submit Florida Commission on Ethics Form 4A (Disclosure of Business Transaction, Relationship or Interest) along with this application to County Administration for consideration. Waiver requests will be forwarded to the County Attorney’s Office for review. Form 4A can be found on the Lee County website - https://www.leegov.com/bocc/advisorycommittees.

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| **Advisory Committee members have a continuing duty to disclose potential conflicts of interest.** |

1. Statutorily Created Required Committee Reporting Data

Lee County complies with Federal, State and Local laws, regulations and guidelines that prohibit discrimination based on race, sex, color, national origin, handicap, age or marital status.

Lee County is required by the State of Florida to collect and maintain the information requested below for statistical reporting purposes only. This information will be maintained separately from your application and will not be considered in the application evaluation process.

The information provided is required by State Statute, however, you have the right not to disclose any or all of this information. This form **must** be returned with your application.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Gender: |  | Male |  | Female |  | Choose Not to Disclose |
| Handicapped / Disabled: |  | Yes |  | No |  | Choose Note to Disclose |

**Racial / Ethnic Data (Check One)**

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| --- | --- |
|  | **WHITE (Not of Hispanic Origin):** All persons having origins in any of the original people of Europe, North Africa or the Middle East. |
|  | **BLACK (Not of Hispanic Origin):** All persons having origins in any of the Black racial groups of Africa. |
|  | **ASIAN OR PACIFIC ISLANDER:** All persons having origins in any of the original Peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example: China, Japan, Korea, the Philippine Islands and Samoa |
|  | **AMERICAN INDIAN OR ALASKAN NATIVE:** All persons having origins in any of the original Peoples of North America and who maintain cultural identification through tribal affiliation or community recognition. |
|  | **HISPANIC:** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin regardless of race. |
|  | CHOOSE NOT TO DISCLOSE |

Lee County, an Equal Opportunity Employer, considers the selection and appointment of persons to advisory committees in a non-discriminatory manner consistent with the requirements of Federal, State and Local non-discrimination laws.

Some board and committee members appointed by the Lee County Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, Financial Disclosure Law, and you may be required to file a Form 1 Statement of Financial Interests

By signing, I confirm that the information provided in this application is true and complete.

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| Date |

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| Signature |

**PROHIBITED EMPLOYMENT AND BUSINESS RELATIONSHIPS[[1]](#footnote-1)**

1. Doing Business With One’s Agency
	1. You may not purchase, rent, or lease any realty, goods, or services for the County from a business entity in which you, your spouse or child own more than a 5% interest. (Sec. 112.313(3), Fla. Stat.)
	2. You may not rent, lease or sell any realty, goods, or services to the County. [Sec. 112.313(3), Fla. Stat.]
2. Conflicting Employment or Contractual Relationship
	1. You may not be employed by or contract with businesses or agencies regulated by or doing business with the County. (Sec. 112.313(7), Fla. Stat.)
	2. You may not hold any employment or have a contractual relationship that will pose a frequently recurring conflict between your private interests and public duties, or which will impede the full and faithful discharge of your public duties. (Sec. 112.313(7), Fla. Stat.)
	3. Limited exceptions to this prohibition have been created (see Sec. 112.313(7)(a) and (b), Fla. Stat.).
3. Exemptions - Pursuant to Sec. 112.313(12), Fla. Stat., the prohibitions against doing business with the County and having conflicting employment may not apply:
	1. When the business is rotated among all qualified suppliers in the County.
	2. When the business is awarded by sealed, competitive bidding and neither you, your spouse, nor child have attempted to persuade County personnel to enter the contract.
		1. NOTE: Ethics Commission Form 3A must be filed with the Supervisor of Elections prior to or at the time of bid submission.
	3. When the purchase or sale is for legal advertising, utilities service, or for passage on a common carrier.
	4. When an emergency purchase must be made to protect the public health, safety, or welfare.
	5. When the business entity is the only source of supply within the County and there is full disclosure of your interest to the governing body on Commission Form 4A.
	6. When the aggregate of business transactions does not exceed $500 in a calendar year.
	7. When the business transacted is the deposit of County funds in a bank of which you are an officer, director, or stockholder, so long as County records show that the Board of County Commissioners has determined that you did not favor your bank over other qualified banks.
1. Adapted from, Guide to the Sunshine Amendment and Code of Ethics for Public Officers and Employees, State of Florida Commission on Ethics (2012). [↑](#footnote-ref-1)