Town of Kiawah Island 4475 Betsy Kerrison Parkway Kiawah Island, SC 29455 Tel: (843) 768-9166

## APPLICATION FOR APPOINTMENT

Please note that members of Town of Kiawah Island boards and commissions must be residents or property owners of Kiawah Island.

PLEASE TYPE OR PRINT CLEARLY. **APPOINTMENT SOUGHT:** (Complete separate application for each position) NAME: **ADDRESS:** PHONE NUMBERS: (Home) (Cell) **EMAIL: CURRENT EMPLOYMENT INFORMATION:** OCCUPATION: EMPLOYER: **BUSINESS ADDRESS:** YES NO Are you a full time Kiawah Resident? Is there any way that you or a member of your family would stand to benefit financially by your YES service on this board or commission? NO Have you ever been employed or had any involvement with this board or commission that NO YES would be reflected either positively or negatively in your service? Have you ever been convicted of a crime involving moral turpitude? YES NO IF YOU ANSWERED "YES" TO ONE OR MORE OF THE ABOVE QUESTIONS, PLEASE EXPLAIN BELOW.

PLEASE ANSWER THE QUESTIONS ON THE FOLLOWING PAGE IN ORDER TO GIVE THE MEMBERS OF TOWN COUNCIL MORE INFORMATION REGARDING YOUR INTEREST IN SERVING ON THIS BOARD OR COMMISSION. YOU ARE ENCOURAGED TO ATTEND THE COUNCIL MEETING WHEN THIS APPLICATION IS CONSIDERED AND WILL BE NOTIFIED OF THE DATE AND TIME OF THAT MEETING IN ADVANCE.

## Town of Kiawah Island APPLICATION FOR APPOINTMENT

PLEASE TYPE OR PRINT CLEARLY. YOU MAY ATTACH A RESUME, CV OR PROVIDE ADDITIONAL INFORMATION IF DESIRED. ALL INFORMATION YOU PROVIDE WITH THIS APPLICATION WILL BE GIVEN TO THE MEMBERS OF TOWN COUNCIL FOR CONSIDERATION.

APPOINTMENT SOUGHT:
(Complete separate application for each position)  NAME:
1. What experience/training/qualifications do you have for this particular board or commission?
2. What specific contributions do you hope to make to this board or commission?
3. Briefly describe your community service background or your involvement in community groups or activities.
4. What community topics concern you that relate to this board?
5. Why do you want to become a member of this board or commission?
6. Are you currently a member, or have you previously served on a Town of Kiawah Island, Kiawah Island Community Association, or Charleston County board or commission? If so, which one(s), and when did you serve?
DO YOU UNDERSTAND THAT, UNLESS OTHERWISE PROVIDED BY LAW, YOU SERVE AT THE PLEASURE OF TOWN COUNCIL AND ALL APPOINTMENTS ARE SUBJECT TO THE ETHICS, GOVERNMENT ACCOUNTABILITY, AND CAMPAIGN REFORM ACT, S.C. CODE ANN. SECTION 8-13-10 ET SEQ, AND ANY MEMBER APPOINTED TO BOARD OR COMMISSION WHOSE ACTION IS INCONSISTENT OR MAY BE PERCEIVED TO BE INCONSISTENT WITH THE SPIRIT OR INTENT OF THE ACT MAY BE SUBJECT TO REMOVAL?
BY SIGNING THIS DOCUMENT, YOU ACKNOWLEDGE THAT YOU MAY BE SUBJECT TO A BACKGROUND INVESTIGATION, INCLUDING, BUT NOT LIMITED TO A CRIMINAL HISTORY, DRIVING RECORD, AND CREDIT CHECK.
DATE. CICNATUDE.