



TOWN OF PALM BEACH

APPLICATION FOR SERVICE ON

RETIREMENT BOARD OF TRUSTEES

Please complete the application by typing or printing legibly in ink. Applications should be submitted to the Town Clerk (360 South County Road, Palm Beach, FL 33480, via facsimile 561-838-5417, or via e-mail to townclerk@townofpalmbeach.com) no later than 5 p.m., 11 calendar days prior to the Town Council meeting in which the appointment will be considered. Completion of this application requires that applicant has reviewed certain Town documents as noted in this application. To review or obtain a copy of the documents please contact the Town Clerk's Office (561-838-5416). Please feel free to attach any additional background information to this application form. (Please be advised that members of the Retirement Board of Trustees must file an annual financial disclosure form per Florida State law).

Name: _____ Residence Address: _____

Mailing Address: _____ Home Telephone: _____

E-mail Address: _____ Work Telephone: _____

I am a resident of the Town of Palm Beach _____ (please initial)

Please attach proof of Town of Palm Beach residency. Failure to attach proof of residency shall be grounds to reject your application. Proof of residency shall be either a copy of your Florida Driver's License matching the address of your residence as shown on this application, a copy of a utility bill in your name at the residence address shown on this application, or by providing an original, fully executed and notarized Declaration of Domicile with this application.

1. Why do you wish to be appointed as a member of the Retirement Board of Trustees? (Please use additional pages if necessary.)

2. Please identify how many meetings of the a Town Retirement Board you have attended in the past two (2) years.
 0 1 2 3 4+

3. If you have served on any boards/commissions/committees in the Town of Palm Beach or elsewhere, please list them and include details such as length of service, attendance record, etc.

4. Please indicate if there are any periods of time for which you will be unavailable for meetings.

5. Please indicate if you are a member of any of the organizations listed below. (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Palm Beach Chamber of Commerce | <input type="checkbox"/> Preservation Foundation of Palm Beach |
| <input type="checkbox"/> Palm Beach Civic Association | <input type="checkbox"/> North End Property Owners Association |
| <input type="checkbox"/> Citizens' Association of Palm Beach | <input type="checkbox"/> Other _____ |

6. Present occupation: _____ No. of years. _____
 Employer: _____

7. Past occupation(s): _____ No. of years. _____
 Employer(s): _____

8. Please provide details regarding your educational background:

9. To enable Town Council to consider potential conflicts of interest, please provide the following information regarding family members who live and/or work in the Town of Palm Beach, including your spouse, parents, siblings, or children.

Family Member Name	Relationship	Address	Occupation	Employer

10. Have you ever been convicted of a crime or pled guilty or nolo contendere to a crime other than minor traffic violations? _____

11. If you are currently serving on a Town board, commission, or committee, please identify it in the space below and check the box that indicates you will resign from that position if you are appointed to the position you are seeking in this application.

I will resign from the _____ if I am appointed to the position I am seeking in this application.

The following information is needed to facilitate Town reporting requirements in Florida Statute 760.80. Please check one in each category.

RACE

African American

Asian American

Hispanic American

Native American

Caucasian

Not Known

GENDER

Male Female

PHYSICALLY DISABLED

Yes No

I hereby certify that I have read the sections of the Town Code of Ordinances for the particular board/commission/committee that I have selected above and have noted the description of the board/commission/committee and its members' duties, and further I have read the regulations concerning absences and conflicts of interests. I certify the information given by me is true and complete to the best of my knowledge and belief. I understand that any falsification of material facts will be grounds for rejection of this application or dismissal after appointment.

SIGNATURE: _____

DATE: _____

Please attach proof of Town of Palm Beach residency (as listed on page 1) with this application.

Please note that Board/Commission applications will expire on December 15 of each year.

RETIREMENT BOARD OF TRUSTEES

The Retirement Board of Trustees consists of nine members as follows:

One employee who is a member of benefit group general or benefit group lifeguard.

One employee who is a member of benefit group firefighter.

One employee who is a member of benefit group police officer.

Five residents of the Town

The Town Manager

The Retirement Board of Trustees acts in a fiduciary capacity for the Town's retirement funds and in an advisory capacity to the Town Council on matters relating to the administration of the Town's various retirement plans. Trustees other than the Town Manager or Acting Town Manager shall serve three-year terms, and may succeed themselves in office. The Retirement Board of Trustees will meet at least quarterly and on occasion, specially called meetings.