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Application for Board of Trustees Position

The information submitted will be used by the Board of Governors in considering action on your application. The questionnaire MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Completed applications should be sent to: Board of Governors, 325 W. Gaines Street, Suite 1614, Tallahassee, FL 32399-0400. Please type or print.

If appointed, you will be required to file financial disclosure statements.

August 20, 2009

Date Completed

1. Name: Adler Michael M.
Last First Middle and/or (Maiden)

2. University Board of Interest: Florida International University Board of Trustees

Are you applying for reappointment? Yes No

3. Residence Address: [Redacted] Miami Beach, FL 33140
Street City County

4. Current Employer or Occupation: Chairman and CEO, Adler Group, Inc.

Business Address: 1400 NW 107th Avenue, Suite 500, Miami, FL 33172
Street Office#/Suite City

[Redacted] (305) 392-4001
Post Office Box Suite Zip Code Area Code/Phone Number

madler@adlergroup.com
E-mail Address

5. Specify the preferred mailing address: Business Home Fax # (305) 392-4004

6. List all places of residence for the past five (5) years.

[Redacted] Miami Beach, FL 2000 Present
Address City and State From To

7. List all former and current residences outside of Florida that you have maintained at any time during adulthood.

1147 Vista Way Linville, NC 2005 Present (Summer Home)
Address City and State From To

8. Date of Birth: [redacted] Place of Birth: NYC, New York

9. Social Security No.: [redacted] *

10. Driver License No: [redacted] * Issuing State: Florida

11. Have you ever used or been known by any other legal name? Yes No If "Yes" explain.

12. Are you a United States citizen? Yes No If "No" explain.

13. If you are a naturalized citizen, date of naturalization: N/A

14. Since what year have you been a continuous resident of Florida? 1958

15. Are you a registered Florida voter? Yes No If "Yes" list:

County of Registration Miami-Dade

16. Education:

A. High School: Lear School Year Graduated: 1969
(Name and Location)

B. List all postsecondary educational institutions attended:

<u>Name and Location</u>	<u>Date Attended</u>	<u>Certificates/Degrees Received</u>
University of Miami	graduated 1973;	Bachelor's Business Administration
_____	_____	_____
_____	_____	_____

17. Are you or have you ever been a member of the United States armed forces? Yes No

If "Yes" list:

A. Dates of service: _____

B. Branch or component: _____

C. Date and type of discharge: _____

18. Have you ever been arrested, charged, or indicted for violation of any federal, state, county or municipal law, regulation, or ordinance? (Exclude traffic violations for which a fine or civil penalty of \$150 or less was paid.) Yes No If "Yes" give details:

<u>Date</u>	<u>Place</u>	<u>Nature</u>	<u>Disposition</u>

19. Concerning your current employer and for all of your employment, including self-employment, during the last five years, list your employer's name, business address, type of business, occupation or job title, and period(s) of employment:

<u>Employer Name and Address</u>	<u>Type of Business</u>	<u>Occupation/Title</u>	<u>Period of Employment</u>
Adler Group; 1400 NW 107 Ave, Ste. 500;	Real Estate Development;	Chairman and Chief Executive Officer;	1978-Present

20. Have you ever been employed by any state, district, or local government agency in Florida? Yes No If "Yes", identify the position(s), the name(s) of the employing agency, and the period(s) of employment, and reason for leaving:

<u>Position</u>	<u>Employing Agency</u>	<u>Period of Employment</u>

21. State your experiences and interests or elements of your personal history that qualify you for this appointment.

President of Grater Miami Jewish Federation
Chairman of Mount Sinai Medical Center
FIU Foundation Chair Development Committee

22. Have you received any degree(s), professional certification(s) or designation(s) including awards related to the subject matter of this appointment? Yes No If "Yes", list:

FIU Cal Kovens Distinguished Community Service Award

23. Identify all association memberships and association offices held by you that relate to this appointment:

FIU Foundation Chair Development Committee
FIU Foundation Board of Directors

24. Do you currently hold an office or position (appointive, civil service, or other) with the Federal or any foreign government? Yes No If "Yes", please list:

25. Have you ever been elected or appointed to any public office in this state? Yes No If "Yes", state the office title, date of election or appointment, term of office, and level of government (city, county, district or state):

Office Title Date of Election or Appointment Term of Office Level of Government

If your service was on an appointed board(s), committee(s) or council(s):

- A. How frequently were meetings scheduled? _____
- B. If you missed any of the regularly scheduled meetings, state the number of meetings attended, number missed, and the reason(s) for absence(s).

Meetings Attended Meetings Missed Reason for Absence

26. Have you ever served on any profit or not-for-profit board? Yes No If "Yes", state the title, date of appointment, length of service, and provide a brief description of your involvement.

Grater Miami Jewish Federation - President- 2 years - Past President
Mount Sinai Medical Center - Chairman- 2 Years - Present Chairman
FIU Foundation Board of Directors - Chair - Development Committee- 2 Yrs.

27. Have you ever been responsible or played a role in managing a business or other corporate entity? Yes No If "Yes", state the name of the business, the dates of your involvement, and provide a brief description of your involvement.

Adler Group, Inc. - 1978- Chairman, CEO - Multi-Profile Real Estate Firm

28. Describe any involvement with and/or relationship to the university to which you are applying or any other educational institution with which you are/were affiliated (other than as a student).

FIU Foundation Board of Directors
FIU Foundation Chair Development Committee
UF Foundation Board of Directors - past

UM Member of the Citizens Board and Hurricane Club

29. Describe your understanding of the role of a board of trustee member in ensuring the fiduciary and academic well-being of the university.

To support the Univerisity with both my time business and life experience.
To influence others to give their support as well.

30. Has probable cause ever been found that you were in violation of Part III, Chapter 112, F.S., the Code of Ethics for Public Officers and Employees? Yes No If "Yes", give details:

Date	Nature of Violation	Disposition

31. Have you ever been suspended from any office by the Governor of the State of Florida? Yes No If "Yes", list:

Title of Office _____ Reason for Suspension: _____
Date of suspension: _____ Result: Reinstated Removed Resigned

32. Have you previously been appointed to any office that required confirmation by the Florida Senate?

Yes No If "Yes", list:
Title of Office: _____
Term of Appointment: _____
Confirmation results: _____

33. Have you ever been refused a fidelity, surety, performance, or other bond? Yes No If "Yes", explain:

34. Have you held or do you hold an occupational or professional license or certificate in the State of Florida? Yes No If "Yes", provide the title and number, original issue date, and issuing authority. If any disciplinary action (fine, probation, suspension, revocation, and/or disbarment) has ever been taken against you by the issuing authority, state the type and date of the action taken:

<u>License/Certificate Title & Number</u>	<u>Original Issue Date</u>	<u>Issuing Authority</u>	<u>Disciplinary Action/Date</u>
[REDACTED]	December 13, 1976	State of Florida	

35. Have you, or businesses of which you have been an owner, officer, or employee, held any contractual or other direct dealings during the last four (4) years with any state or local governmental agency in Florida, including the university to which you have been appointed or are seeking appointment? Yes No If "Yes", explain:

<u>Name of Business</u>	<u>Your Relationship to Business</u>	<u>Business' Relationship to University</u>

36. Have members of your immediate family (spouse, child, parent(s), sibling(s)), or businesses of which members of your immediate family have been owners, officers, or employees, held any contractual or other direct dealings during the last four (4) years with any state or local governmental agency in Florida, including the university to which you have been appointed or are seeking appointment? Yes No If "Yes", explain:

<u>Name of Business</u>	<u>Family Member's Relationship to you</u>	<u>Family Member's Relationship to Business</u>	<u>Business' Relationship to University</u>

37. Have you ever been a registered lobbyist or have you lobbied at any level of government at any time during the past five years? Yes No If "Yes", explain:

A. Did you receive any compensation other than reimbursement for expenses? Yes No

B. Name of agency or entity you lobbied and the principals you represented:

<u>Agency Lobbied</u>	<u>Principals Represented</u>

38. List three persons who have known you well during the past five (5) years. Include a current, complete address and telephone number. Exclude your relatives and members of the Florida Senate.

<u>Name</u>	<u>Mailing Address</u>	<u>Zip Code</u>	<u>Area Code/Telephone Number</u>
Leonard Abess	25 West Flagler St Miami, FL	33130	(305) 577-7352
Dr. Phil Frost	4400 Biscayne Blvd. Miami, FL	33137	(305) 575-6001
Rodney Barreto	235 Catalonia Ave. Coral Gables, FL	33134	(305)444-4648

39. Name any business, professional, occupational, civic, or fraternal organization(s) of which you are now a member, or of which you have been a member during the past five (5) years, the organization address(es), and date(s) of your membership(s).

<u>Name</u>	<u>Mailing Address</u>	<u>Office(s) Held & Term</u>	<u>Date(s) of Membership</u>
Mount Sinai Medical Center	4300 Alton Road Miami Beach	Chairman	2007- Present
Greater Miami Jewish Federation	4200 Biscayne Blvd. Miami, FL	President	2000-2003
Temple Emanu-El	1700 Washington Avenue Miami Beach, FL	President	1995- 1997

40. Do you know of any reason why you will not be able to attend fully the duties of the position to which you have been or will be appointed? Yes No If "yes", explain:

41. Are you now, or have you within the past three years, been a member of any club or organization that, to your knowledge, in practice or in policy, restricts membership or restricted membership during the time that you belonged, on the basis of race, religion, national origin or gender?

Yes No If "yes", detail the name and nature of the organization, relevant policies and practices, and state whether you intend to continue as a member if appointed by the Board of Governors.

42. Have you ever been the object of any equal employment opportunity complaint or any civil action based upon discrimination in the work place? Yes No If "yes", explain and provide details of the outcome:

43. Are there any pending lawsuits against you or are you a party to a lawsuit in any court in which you are the plaintiff or defendant? Yes No If "yes", what type and where?

44. Have any judgments been entered against you as a result of any civil or administrative proceeding(s)? Yes No If "yes", identify the proceeding(s) that resulted in the judgment and the date the judgment was entered.

45. Are you now engaged in activities, or have you engaged in activities in the past, that will reflect unfavorably on the board to which you seek appointment? Yes No If "yes", please explain.

46. Is there anything that you were not questioned about in your application that you should make known to us at this time that impugns your integrity, character and fitness for the position you are seeking? Yes No If "yes", please explain.

CERTIFICATION

STATE OF FLORIDA, COUNTY OF Dade

Before me, the undersigned authority, personally appeared Michael M. Aslee who after being duly sworn, say: 1) that he/she has carefully prepared or read the answers to the foregoing question; 2) that the information contained in said answers is complete and true; 3) that he/she will, as an appointee, fully support the Constitutions of the United States and the State of Florida. Be it further known that in signing this document I understand that a Level 2 background check by the Florida Department of Law Enforcement will be performed on all nominees who are recommended to the Florida Board of Governors.

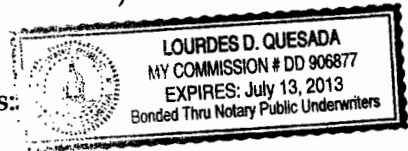
[Signature]
Affiant's signature

Sworn to and subscribed before me on this 20 day of August, 2009, by Michael M. Aslee.

[Signature]
(signature of notary)

Loures D. Quesada
(typed, printed or stamped name)

Notary Public
Commission No.:
My Commission Expires:



Personally Known OR Produced Identification
Type of Identification Produced _____

MEMORANDUM

AS A GENERAL MATTER, APPLICATIONS FOR ALL POSITIONS WITHIN STATE GOVERNMENT ARE PUBLIC RECORDS WHICH MAY BE VIEWED BY ANYONE UPON REQUEST. HOWEVER, THERE ARE SOME EXEMPTIONS FROM THE PUBLIC RECORDS LAW FOR IDENTIFYING INFORMATION RELATING TO PAST AND PRESENT LAW ENFORCEMENT OFFICERS AND THEIR FAMILIES, VICTIMS OF CERTAIN CRIMES, ETC. IF YOU BELIEVE AN EXEMPTION FROM THE PUBLIC RECORDS LAW APPLIES TO YOUR SUBMISSION, PLEASE CHECK THIS BOX.

Yes, I assert that identifying information provided in this application should be excluded from inspection under the Public Records Law.

IF YOU NEED ADDITIONAL GUIDANCE AS TO THE APPLICABILITY OF ANY PUBLIC RECORDS LAW EXEMPTION TO YOUR SITUATION, PLEASE CONTACT THE GENERAL COUNSEL FOR THE BOARD OF GOVERNORS.

Vikki R. Shirley
General Counsel
Board of Governors
State University System of Florida
325 W. Gaines Street, Suite 1614
Tallahassee, FL 32399-0400
(850) 245-0466