State University System of Florida
University Board of Trustees
Application

Name: _____ **Date Completed:** _____
Last First Middle and/or Maiden

Mailing Address:
Number & Street City State Zip Code

Phone Number: **Email Address:**

University Board of Interest:

Select a University on the Dropdown list

Are you applying for reappointment?

☐ Yes ☐ **No**

Describe any involvement with and/or relationship to the university to which you are applying (other than a student).

INSTRUCTIONS

The information submitted will be used in considering action on your application. If appointed, please be advised that your appointment is subject to confirmation by the Florida Senate.

Please type or print clearly. Please do not leave any questions blank – answer "none" or "not applicable" where appropriate.

Submit the original completed application via mail, email, or facsimile to:

State University System of Florida, Board of Governors
325 West Gaines Street, Suite 1614
Tallahassee, FL 32399
Fax: (850) 245-9685 Email: Chancellor@flbog.edu

PLEASE NOTE: If you appointed to an university Board of Trustees, you will be required to file an annual financial disclosure statement with the Florida Commission on Ethics (Form 1).

Authority: Section 112.313(17), Florida Statutes, prohibits any citizen member of a university board of trustees from having any employment or contractual relationship as a legislative lobbyist requiring annual registration under section 11.045, Florida Statutes. Article II, section 5(a) of the Florida Constitution prohibits any person from holding more than one office under the government of the state, counties, and municipalities at the same time, except for certain exclusions stated therein (notary public, military officer, member of a statutory body having only advisory powers, etc.)

PERSONAL INFORMATION

1. Salutation:_____ First:_____ Middle:_____ Last:_____

2. Marital Status:_____ Spouse information, if applicable: First:_____ Last:_____

3. Have you ever been known by any other legal name? Yes ☐ No ☐

If "yes", explain.

_____

4. Please list all of your places of residence for the last ten (10) years from most current to previous.

Address **City, State, & Zip Code** **Dates: From/To**

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5. Since what year have you been a continuous resident of Florida? _____

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

Address **City, State, & Zip Code** **Dates: From/To**

_____

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EDUCATION

Type of School	Name and Location of School	Year Graduated	Field of Study
High School			
Undergraduate			
Graduate			
Other			

**If you have additional education that you would like to include, please attach additional pages at the end of this document.*

EMPLOYMENT

1. Are you retired? Yes ☐ No ☐

2. Please list your current employer and job title. If retired, please provide your most recent employer and job title. Current Employer_____ Job Title_____

3. Please list any employers and job titles held within the past ten (10) years from most current to previous.

Employer	Job Title	Dates: From/To

4. Have you ever been employed by any state, district, or local government agency in Florida that were not listed above? Yes ☐ No ☐

If "yes", list:

Name of Employing Agency	Position	Period(s) of Employment

5. Have you ever been asked to resign or been terminated from any form of employment? Yes ☐ No ☐

If "yes", explain. _____

_____

_____

6. Have you ever been the object of any administrative or civil action based upon discrimination in the workplace? Yes ☐ No ☐

If "yes", explain and indicate the disposition of the administrative or civil action.

_____

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_____

7. Are you or have you ever been a member of the Armed Forces of the United States? Yes ☐ No ☐

Did you serve in combat? Yes ☐ No ☐ Branch and Component_____

Dates of Service_____ Date and Type of Discharge_____

PUBLIC SERVICE

1. Have you ever been elected to any public office in this state? Yes ☐ No ☐

If "yes", list:

Title(s) of Office	Date of Election(s)	Term of Office(s)	Level of Government

2. Have you ever been a candidate for any public office in this state? Yes ☐ No ☐

If "yes", list:

Title(s) of Office	Date(s) of Candidacy	Election Results

3. Have you ever been appointed to any public office in this state? Yes ☐ No ☐

If "yes", list:

Title(s) of Office	Date(s) of Appointment	Term of Office(s)	Level of Government

If you have been appointed to any public office, answer the following:

Number of meetings held during your tenure on the board_____

Number of meetings you attended _____

Number of meetings you missed_____

Reason(s) for your absence _____

4. Have any members of your immediate family (spouse, child, parent(s), sibling(s)) been appointed to serve as a Gubernatorial appointee in the state of Florida? Yes ☐ No ☐

If "yes", list:

Name of Appointee	Relation to You	Date of Appointment	Title(s) of Office

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

Yes☐ No☐

If "yes", list:

Title(s) of Office	**Term(s) of Appointment**	**Confirmation Result**

6. Have you ever resigned from any position, elected or appointed? Yes☐ No☐

If "yes", list:

Title(s) of Office	**Date(s) of Resignation**	**Reason for Resignation**

7. Have you ever been suspended by the Governor of the state of Florida or any Governor from any position, elected or appointed? Yes☐ No☐

If "yes", list:

Title(s) of Office	**Date(s) of Suspension**	**Reason for Suspension**

ETHICAL DISCLOSURE

1. Have you ever been arrested, charged, or indicted for violation of any federal, state, county, or municipal law, regulation, or ordinance? This would include any time you have ever been convicted, entered a guilty plea of nolo contendere for any criminal violation (exclude traffic violations for which a fine or civil penalty of $150 or less was paid.) Yes☐ No☐

If "yes", explain. _____

2. If you have ever been convicted of a crime and that record is sealed or expunged, select one of the following: **Sealed** ☐ **Expunged** ☐ **Not Applicable** ☐

3. Are you currently facing investigation, charges, or indictment for any violation of law? Yes ☐ No ☐

If "yes", explain. _____

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4. Have you ever been a party or involved in any civil or criminal legal proceedings? Yes ☐ No ☐

If "yes", explain (Do not include any information where no allegations of wrongdoing were alleged against you).

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5. Are you the plaintiff or defendant in any action pending before any judicial or administrative tribunal?

Yes ☐ No ☐

If "yes", explain. _____

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6. Have you ever been refused a fidelity, surety, performance, or other bond? Yes ☐ No ☐

If "yes", explain. _____

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7. In the last five years, has any business in which you, a spouse, a relative, or a business associate been a party to any administrative agency proceeding or civil litigation relevant to the position in which you wish to be appointed to? Yes ☐ No ☐

If "yes", explain.

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8. Has probable cause ever been found that you were in violation of the Code of Ethics for Public Officers and Employees, Part III, Chapter 112, F.S.? Yes ☐ No ☐

If "yes", list:

Date(s) of Violation	**Nature of Violation(s)**	**Disposition**

9. Have you, or any business 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 government agency in Florida, including the office or agency to which you have been appointed to or are seeking appointment?

Yes ☐ No ☐

If "yes", explain.

Name of the Business	**Your Relationship to the Business**	**Business Relationship to the Agency**

10. 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 agency to which you have been appointed or are seeking appointment? Yes ☐ No ☐

If "yes", explain.

Name of the Business	**Relationship to you**	**Their Relationship to Business**	**Business Relationship to the Agency**

11. Have you ever been a registered lobbyist or have you lobbied at any level of government at any time during the last five (5) years? Yes ☐ No ☐

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

If "yes", explain.

Name of the Agency Lobbied	**Principal(s) you represented**

12. Dual Office Holding? Yes ☐ No ☐

Article II, section 5(a) of the Florida Constitution prohibits any person from holding more than one office under the government of the state, counties, and municipalities at the same time, except for certain exclusions stated therein (notary public, military officer, member of a statutory body having only advisory powers, etc.).

13. Are there any other possible conflicts of interest or perceived conflicts of interest that could hinder your ability to serve as an appointee? Yes ☐ No ☐

If "yes", explain. _____

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EXPERIENCE AND INTERESTS

1. Please state your experiences and interests or elements of your personal history that qualify you for appointment to this board. _____

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2. Please list any awards or recognitions that you have received within the past ten (10) years.

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3. Describe your understanding of the role of a member on the board that you are applying to be considered for. _____

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4. Please explain why you want to serve as an appointee and share anything else that you think may be helpful. _____

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5. Have you held or do you hold an occupational or professional license or certificate in the state of Florida?

Yes☐ No☐

If "yes", list:

Type of License/Certification **Original Issue Date** **Issuing Authority** **License Number**

_____

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6. Have you ever had any disciplinary action taken against a license or certification issued to you, including a fine, probation, revocation, or disbarment? Yes☐ No☐

If "yes", explain. _____

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7. Please identify all association memberships and offices (including any business, professional, occupation, civil, fraternal organizations, or any profit or not-for-profit board) that you currently hold or have held in the past ten (10) years including volunteer positions.

Name of Association **Role in the Association** **Dates of your Membership**

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8. List three people who have known you well within the past five (5) years. Please exclude relatives:

Name **Organization** **Relation to you** **Phone Number and Email Address**

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9. Did someone refer you to apply to be considered for appointment to this board? Yes☐ No☐

If "yes", list their name. _____

CERTIFICATION AND SIGNATURE

1. Do you know of any reason why you would not be able to attend fully to the duties of the office or position to which you have been or could be appointed? Yes ☐ No ☐

If "yes", explain.

_____

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2. If appointed, I agree to follow, as applicable to the position, Florida's public records and open meeting laws. Initial here. _____

3. If appointed, I agree to follow, as applicable to the position, the Code of Ethics for Public Officers and Employees, Part III, Chapter 112, F.S. Initial here. _____

4. I have read the foregoing application and any attachments and the facts stated within them are true, correct, and complete to the best of my knowledge and belief. Initial here. _____

5. By checking this box and typing my name below, I am electronically signing my application and understand that an electronic signature has the same force and effect as a written signature. ☐

/s/**First**_____ **Middle**_____ **Last**_____ **Suffix** _____

EXEMPTION FROM PUBLIC RECORDS

AS A GENERAL MATTER, APPLICATIONS FOR ALL POSITIONS WITHIN STATE GOVERNMENT ARE PUBLIC RECORDS THAT MAY BE VIEWED UPON REQUEST. HOWEVER, THERE ARE SOME EXEMPTIONS FROM THE PUBLIC RECORDS LAW FOR CERTAIN 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 AT GENERALCOUNSEL@FLBOG.EDU or (850) 245-0466.