BOARD OF GOVERNORS
STATE UNIVERSITY
SYSTEM OF FLORIDA
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STATE UNIVERSITY SYSTEM *of* FLORIDA
Board of Governors

Application Form
University Board of Trustees Position
State University System of Florida

Name: WHITE (Last) KARL (First) E (Middle and/or Maiden) **Date Completed:** August 26, 2010

INSTRUCTIONS

The information submitted will be used by the Board of Governors in considering action on your application. If appointed, please be advised that your appointment is subject to confirmation by the Florida Senate and you will be required to file an annual financial disclosure statement with the Florida Commission on Ethics.

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

All applications must be signed and witnessed by a Notary. Submit the original completed application via mail, email, or facsimile by the posted deadline to:

State University System of Florida, Board of Governors
325 W. Gaines Street, Suite 1614
Tallahassee, FL 32399-0400
Fax 850.245.9685 Chancellor@flbog.edu

PLEASE NOTE: any application submitted by facsimile or email must be received by the posted deadline and followed by the original signed application to above address.

EXCLUSIONS

The following conditions exclude eligibility for appointment as a University Board of Trustee member.

Registered Lobbyist: No ☑ Yes ☐ **Dual Office Holding:** No ☑ Yes ☐

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.)

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.

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

PERSONAL INFORMATION

Name: WHITE (Last) KARL (First) E (Middle and/or Maiden) **Date Completed:** August 26, 2010

1. **University Board of Interest:** Are you applying for reappointment? Yes ☑ No ☐

FAMU ☑ FAU ☐ FGCU ☐ FIU ☐ FSU ☐ NCF ☐ UCF ☐ UF ☐ UNF ☐ USF ☐ UWF ☐

2. **Residence Address:** [redacted] (Street) Boston (City) MA (State) Suffolk (County) 02114 (Zip Code)

(617) 557-9128 (Area Code/Phone) (617) 510-7260 (Cell Phone)

3. **Current Employer or Occupation:** Gracian & Co., LLC

Business Address: 20 Park Plaza (Street) 4th Floor (Office) Boston (City) Massachusetts (State)

02114 (Zip Code) (617) 948-2186 (Area Code/Phone Number)

Post Office Box Suite

kwhite@gracian-group.com (E-mail Address)

4. **Specify the preferred mailing address:** Business ☑ Home ☐ Fax # (617) 948-2501

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

Address	City and State	From	To
[redacted]	Boston, Massachusetts	1/1998	Present

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

Address	City and State	From	To
[redacted]	Boston, Massachusetts	1/1998	Present
21 Bowdoin Street	Boston, Massachusetts	7/1995	1/1998
5316 S Dorchester	Chicago, Illinois	5/1993	7/1995
1415 Parker Street	Detroit, Michigan	10/1988	5/1993

7. **Date of Birth:** [redacted] * **Place of Birth:** Fort Benning, Georgia USA *

8. **Social Security No.:** [redacted] *

9. **Driver License No:** [redacted] * **Issuing State:** Massachusetts *

***ALL INFORMATION MARKED WITH AN ASTERIK IS REQUIRED FOR CONDUCTING BACKGROUND SCREENING AND WILL BE REDACTED PRIOR TO DISTRIBUTION OF THE APPLICATION TO THE TRUSTEE NOMINATING COMMITTEE MEMBERS. REFER TO ATTACHED NOTICE ON USE OF SOCIAL SECURITY NUMBERS.**

10. **Have you ever been known by any other legal name?** Yes☐ No☑ If "Yes" explain.

11. **Are you a United States citizen?** Yes☑ No☐ If "No" explain.

12. **If you are a naturalized citizen, date of naturalization:** Not applicable

13. **Since what year have you been a continuous resident of Florida?** I am not a Florida resident

14. **Are you a registered Florida voter?** Yes☐ No☑

15. **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:

Date	Place	Nature	Disposition

16. **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

17. **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☐

18. **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?

19. **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.

20. **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", explain.

21. **Have you ever been refused a fidelity, surety, performance, or other bond?** Yes☐ No☑ If "Yes", explain.

EDUCATION, LICENSURE, MEMBERSHIPS

22. **Education**:

A. High School: Jefferson County High School, Monticello, Florida (Name and Location) Year Graduated: 1983

B. List all postsecondary educational institutions attended:

Name and Location	Date Attended	Certificates/Degrees Received
Florida A&M University	8/1982-5/1988	Bachelor of Science, Pharmacy
University of Chicago	5/1993-6/1995	Masters of Business Administration

23. **Have you received any degree(s) or professional certification(s) related to the subject matter of this appointment?** Yes☐ No☑ If "Yes", list:

24. **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:

License/Certificate Title & Number	Original Issue Date	Issuing Authority	Disciplinary Action/Date
[redacted] (Pharmacist)	1988	Department of Health	None

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

None

26. **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).**

Name	Mailing Address	Office(s) Held & Term	Date(s) of Membership
Kappa Alpha Psi Fraternity	2323 N Broad, Philadelphia, PA		3/1983-Present
The Partnership	172 Newbury, Boston, MA		9/1996-12/2008

27. **Are you now, or have you within the past four (4) 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.

EMPLOYMENT HISTORY AND PROFESSIONAL BACKGROUND

28. **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:**

Employer Name and Address	Type of Business	Occupation/Title	Period of Employment
Gracian & Co., LLC	Consulting	Owner	12/2008-Present
Fletcher Asset Management	Investment Management	Chief Investment Office	7/2006-11/2008
MBTA Retirement Fund	Pension Fund	Executive Director	3/2002-6/2006

29. **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:

Position	Employing Agency	Period of Employment
Computer Programmer (OPS)	Florida State Univ, College of Education	1982-1988. Part-time during college. Left upon graduation.

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

Gracian & Co., LLC	12/2008-Present	Owner and CEO
Fletcher Asset Management, Inc.	7/2006-11/2008	Chief Investment Officer
MBTA Retirement Fund	3/2002-6/2006	Executive Director
Ancora Pharmaceuticals, Inc.	2002-Present	Chair, Board of Directors

31. **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: _____

32 **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:

_____

_____

_____

_____

33. **Have you previously been appointed to any office that required confirmation by the Florida Senate?** Yes ☑ No ☐ If "Yes", list:

Title of Office: Trustee, Florida A&M University (FAMU)

Term of Appointment: 7/2007 - 1/2011

Confirmation results: Confirmed

34. **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
Trustee, FAMU	7/2007	7/2007-Present	State

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

A. How frequently were meetings scheduled? At least quarterly, by statute

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
	None	Not applicable

35. **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.

Roxbury Youthworks, Inc.	1997-Present	Currently, Chair of the Board of Directors
Ancora Pharmaceuticals, Inc.	2002-Present	Currently, Chair of the Board of Directors
University of Massachusetts	1999-2007	Vice Chair of the Board, various committee Chairs
University of Massachusetts Foundation	2001-Present	Investment Committee

36. **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", please 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:

Agency Lobbied	Principals Represented

37. **Describe your experiences and interests or elements of your personal history that qualify you for this appointment.**
I have 10 years experience as a public university trustee, the same on non-profit boards and over 8 years of private compay experience. Paramount, in my view, I have a deep appreciation of the impact that the high quality and affordable education I was able to receive at FAMU has had upon my life. I view this servce as an obligation to ensure that those who would follow have the same opportunity I was afforded.

38. **Describe your understanding of the role of a member of a university board of trustees.**
I have served as a trustee of a public university since 1999, first at the University of Massachusetts and at FAMU since 2007. During this time, I've served as Vice Chair of the Board, Chair of Academic Affairs, Chair of Audit, Vice Chair of Budget/Finance and on 3 presidential/chancellor searches, This series of experiences has provided me with what I believe is a sound basis to serve as an effective trustee.

CONFLICT OF INTEREST

39. **Describe any involvement with and/or relationship to the university to which you are applying (other than as a student).**
I have no relationship to Florida A&M University beyond my current role as trustee.

40. **Have you, or any business of which you have been an owner, officer, or employee, held any employment or contractual relationship during the last four (4) years with the university to which you are seeking appointment?** Yes☐ No☑ If "Yes", identify:

Name of Business	Your Relationship to Business	Business' Relationship to University

41. **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 employment or contractual relationship during the last four (4) years with the university to which you are seeking appointment?** Yes☐ No☑ If "Yes", explain:

Name of Business	Family Member's Relationship to you	Family Member's Relationship to Business	Business' Relationship to University

42. **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:

_____

_____

_____

_____

REFERENCES

43. **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.**

Name	Mailing Address Zip Code	Area Code/Telephone Number
Arron Gober	313 Williams Street #2, Tallahassee, FL 32303	(850) 222-0766
Warren Henderson	32 Wedgewood Drive, Hopkinton, MA 01748	(508) 497-0936
Jane M. Swift	600 Atlantic Avenue, Boston, MA 02210	(617) 532-3036

CERTIFICATION

STATE OF Massachusetts

COUNTY OF Suffolk

Before me, the undersigned authority, personally appeared Karl E. White who after being duly sworn, says: 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 the undersigned understands that a background check by the Florida Department of Law Enforcement will be performed on all nominees who are recommended to the Florida Board of Governors and that he/she has received a copy of the Board of Governors' Statement on the Collection, Use or Release of Social Security Numbers.

Affiant's signature

Sworn to and subscribed before me on this 26th day of August, 2010, by

Mary Babb.

Mary Babb

(signature of notary)

MARY H. BABB

(typed, printed or stamped name)

Notary Public

Commission No.:

My Commission Expires:

MARY H. BABB
NOTARY PUBLIC
Commonwealth of Massachusetts
My Commission Expires
June 21, 2013

Personally Known X OR Produced Identification _____

Type of Identification Produced _____