## HAMILTON COUNTY BOARDS AND COMMISSIONS APPLICATION

Board of County Commissioners, Hamilton County, Ohio (www.hamiltoncountyohio.gov) Complete all pages and fax to: (513) 946-4444 or mail to: Leslie Hervey, Clerk **Board of County Commissioners** 138 E. Court Street, Room 603 Cincinnati, OH 45202

The information from this application will be used exclusively by the Board of County Commissioner's office, Hamilton County, Ohio. Hamilton County, Ohio is an equal opportunity employer and will not use any of the information you provide to discriminate against you on the basis of race, color, religion, sex, national origin, handicap, age, or ancestry. Please note that this form with your answers is subject to public disclosure under the Ohio Open Records Law, subject to certain redaction permitted by law. If you need more space to answer any question or explain any of your answers, please use additional sheets. Please type or print clearly. This information must be completed in full. Answer "none" or "not applicable" where appropriate. Attach résumé, if available. Hamilton County Boards and Commissions members are required to be electors (registered voters) of Hamilton County, Ohio.

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Are you a registered voter in Hamilto	on County, Ohio?	Yes	s No		
Mr./Mrs./Miss/Ms. Last		First		М	iddle/Maiden
Residence Address		City	Sta	te Zi	p Code
Residence Phone	Residence Fax		Res	sidence Email	l Address
Occupation					
Business/Employer Name					
Business/Employer Address		City	Sta	te Zi	p Code
Business/Employer Phone Specify preferred mailing address:	Business/Emplo	yer Fax Business	Business/E	Employer Ema	ail Address
Specify Board(s) and/or Commission	n(s) in which you	are intereste	d:		

Some Boards and Commissions are required to have members who are qualified with specific criteria. Please indicate the required position, if any, for which you qualify:

For more information, see "Members" section under the description of each Board at: https://www.hamiltoncountyohio.gov/boards commissions.

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Do you currently serve on a Hamilton County appointed Board or Commission? If so, which one(s):

Are you applying for reappointment to a Board or Commission on which you currently serve?

Yes No If yes, how many terms have you served on this Board or Commission? terms.

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High School or equivalent: Undergraduate School: Graduate School:	Graduated: Graduated: Graduated:	Yes Yes Yes	No No No
Please explain your reason for seeking this board/commission bring to the board through your service:	on appointment, and what	you hop	oe to
List any relevant nonpaid work experience, internship, civic or v resume if possible):	olunteer activities (please a	ttach a	
Previous addresses in the past ten years (include number of ye	ars, residence, city and stat	e):	
Employment history over the past ten years (include number of	years, employer, city and st	tate):	
List any disciplinary action taken against you, for a breach of et	hics or unprofessional cond	uct, by a	ıny

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Are you currently in arrears on any court ordered child support payments? If yes, please explain:
Have you been publicly identified with a controversial national, state, or local matter related to any issue that may be presented before the Board(s) or Commission(s) to which you are applying? If yes, please explain:
Have you ever submitted oral or written statements to any government authority or the news media on topics related to any issue that may be presented before the Board(s) or Commission(s) to which you ar applying? If yes, please explain:
Please disclose all joint holdings of real or personal property, business partnerships, or joint business or partnership interests, you or members of your family maintain with any current County public officials or member of their family, or other official associated with the board for which you are seeking appointment Please disclose both the official(s) and nature of the relationship.
Do you own real property, personal property, financial holdings or receive income from any source which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain:
Within the past three years, have you been assessed a penalty for failure to file a timely federal, state or local personal income tax return or for failure to pay taxes owed? If yes, please explain:

remitting withholding taxes or sales taxes, failed to pay such taxes in a timely manner? If yes, please explain:
Please disclose all County elected officials to whom you have made campaign contributions over the last four years. Note: this information has already been publicly disclosed in finance reports. It is not disqualifying, but simply aids in transparency.
NOTE: Please be advised that if you seek appointment to the:     Community Mental Health Board (CMHB), or     Developmental Disabilities Services (DDS)
The Ohio Revised Code provides that Board membership shall, as nearly as possible, reflect the composition of the population of the service district (Hamilton County, Ohio) as to race and gender. Therefore, you may be requested to provide your gender and racial classifications.
PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS STATEMENT:  I,  and statements on this form are true, complete, and correct to the best of my knowledge and are made in good faith.
Signature: Date:

Within the past three years, has any business venture for which you were a person responsible for