

APPLICATION TO SERVE ON A **CHARLOTTE COUNTY ADVISORY BOARD**

■ New Applicant □ Re-Appointment

	INCOM	PLETE APP	LICATIONS WILL	BE RETURNED
Mr/Mr	rs/Ms:			
Name:	Last	VALICKAS	First JOHN	Middle Initial A
			30.111	
Reside	nce Address:			

Street	480 CORAL CRE	FER DRIVE	City PLACIDA	Zip Code 33946
Mailin	g Address:			
		-		
Street	SAME AS A	BOVE	City	Zip Code

Phone !				
		Home (CELL)	973-568-3941	7 Business
FAX:				
E-Mail	Address:	JPVAL	ICKAS@ GMAIL.C	OM
	submit my name fo Commissioners on t			capacity to the Board of Charlotte
1215	TURICAL ADVIS	ory Buard	/ HISTORICAL ORGA	WIZATION REPRESENTATIVE
		N	Name of Advisory Board	
ıı appıyı	ing for a specific car	egory/position,	please so state:	
Occupat	ion: RET	20)		
- 0		_		
lf currei	itly retired, previou	s occupation: _	COUCATION - HIG	IT SCHOOL VICE PRINCIPAL
Civic/Pr	ofessional Accompli			
	VOLUNTEET	L FOR: 1	MUTE MARINE LAB	URATORY, FUC RED TIDEWA
				,
	FLURIDA AUS	10000 679	UE WHICH	

APPLICATION TO SERVE ON A CHARLOTTE COUNTY ADVISORY BOARD – CONTINUED

My qualifications to be eligible are as follows:
AVID INTEREST IN LOCAL HISTORY. I have researched early WEST COUNTY GENERATIONAL PAMILIES, THE CHARLOTTE HARBURG NORTHERN PATIROAD, THE
GENERATIONAL PAMILIES, THE CHARLOTTE HARBURY NORTHERN RATIONAD, THE
FISHING INDUSTRY IN THE PLACIDA BUCA GRANDE ARRANDE ARRANDE CURRENTLY AM ADVOCATING FOR THE RENOVATION OF THE HISTORIC PLACIDA BUNKHOUSE.
If applicable, please indicate any employment, contractual relationship or status that you may have, or have had within the past 12 months, with any private business entity that rents, leases or sells any realty, or provides any goods or services to the County or that is conducting any business with the County.
Is this application for a new appointment? Yes No If yes, please indicate what you would like to accomplish if you are appointed to this Board: Twould very much like to Bring Awareness to the Poblic
THE FEW HISTORICAL SITES REMAINING IN CHARLOTTE COUNTY AND TO
HELP PRESERVE AND PRUTECT THESE SITES PROM DESTRUCTION
Is this application for a re-appointment?
> If yes, please indicate what your accomplishments have been while serving on this Board:
> If "Yes", please indicate what you would like to accomplish during this term:
If you have previously served on a Charlotte County Advisory Board or are currently serving and seeking reappointment, please indicate the number and general nature of any voting conflict disclosure memorandum filed (Form 8B) while serving on the board: None
Have you ever worked for the Charlotte County Board of County Commissioners?
> If "Yes", please list position, department, start and end date:
Do you have any relatives currently working for the Charlotte County Board of County Commissioners? Yes No
> If "Yes", please list name(s) and department(s):
Are you a full-time Charlotte County Resident?

	u ever been convicted of a Felony or Misdemeanor? (Please be sure you understand the question, as failure to answer ly will disqualify you). Yes No
>	If "Yes", please explain:
	u ever pled NO LO CONTENDRE or pled guilty to a crime which is a Felony or a Misdemeanor? (Please be sure you and the question, as failure to answer truthfully will disqualify you).
>	If "Yes", please explain:
	APPLICATION TO SERVE ON A CHARLOTTE COUNTY ADVISORY BOARD – CONTINUED
1.)	All of the Boards and Committees appointed by the Board of County Commissioners are required to comply with the Sunshine Law FS 286.011 and some of the Boards and Committees appointed by the Board of County Commissioners are required to comply with Chapter 112, Florida Statutes, the Financial Disclosure Law. You may be required to file a Form 1 Financial Disclosure. You will be provided with more information upon appointment.
2.)	Charlotte County, an equal opportunity/affirmative action employer, considers the selection and appointment of persons to advisory boards in a non-discriminatory manner consistent with the requirements of Federal, State and Local non-discrimination laws.
3.)	The Board of County Commissioners request that you attend the Commission meeting at which your application will be considered for appointment. This office will notify you of the Commission meeting date.
4.)	Members who fail to regularly attend meetings may automatically forfeit their appointment.
By sign	Signature Date Signature Signature Date
) Signature Date

A résumé or list of qualifications and experience is required but cannot replace this application form.

PLEASE RETURN THIS COMPLETED FORM TO:

Charlotte County Board of County Commissioners Attn: Executive Assistants 18500 Murdock Circle Port Charlotte, FL 33948

OR EMAIL TO:

 $\underline{Assistant@CharlotteCountyFL.gov}$

John Alexander Valickas

Professional experience

Vice Principal

[09/2005-06/2010]

Essex County Vocational-Technical High School

West Caldwell, New Jersey

Acting Principal

[01/2005-06/2005]

Essex County Vocational-Technical High School

West Caldwell, New Jersey

Vice Principal

[09/2000-06/2005]

Essex County Vocational-Technical High School

West Caldwell, New Jersey

Special Needs Instructor

[09/1976-06/2000]

Essex County Vocational-Technical High School

West Caldwell, New Jersey

Education

MA Educational Administration

Certification: Principal and Supervisor

[09/1978-05/1981]

Kean College of New Jersey Union, New Jersey

BA Special Education

Certification: Teacher of the Handicapped

Certification: Elementary Education

[09/1969-05/1973]

Kean College of New Jersey Union, New Jersey

High School Diploma

[09/1964-05/1968]

Essex Catholic High School Newark, New Jersey