



APPLICATION TO SERVE ON A CHARLOTTE COUNTY ADVISORY BOARD

☒ New Applicant ☐ Re-Appointment

INCOMPLETE APPLICATIONS WILL BE RETURNED

Mr/Mrs/Ms:			
Name:	Last Joannes	First Shawn	Middle Initial
Residence Address:			
Street	380 Cory Street	City Port Charlotte	Zip Code 33953-1219
Mailing Address:			
Street	380 Cory Street	City Port Charlotte	Zip Code 33953.1219
Phone No.			
	Home 941.629.3473	Business	
FAX:			
E-Mail Address: FireLap343@gmail.com			

I hereby submit my name for consideration to serve in an advisory capacity to the Board of Charlotte County Commissioners on the following Advisory Board:

Street & Drainage and Waterway

Name of Advisory Board

If applying for a specific category/position, please so state: _____

Occupation: _____

If currently retired, previous occupation: Fire Heavy Equipment Operator / Firefighter (Disabled)

Civic/Professional Accomplishments/Offices Held:

Fire Heavy Equipment Operator / Firefighter (Disabled) {Drove the 26 Busiest Ladder Truck in the US}

For a period of time I was the Union Stwart, I was on the special team that purcured equipment

for the Dive Rescue team to use thru out the year both New or used (for FREE)

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

In order to qualify a volunteer must both be a property owner within and reside within the Unit, and my qualifications to be eligible are as follows:

I live in Northwest Port Charlotte and want the best for me and my County

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.

I help my wife with a local Realty company DebSelsFlorida.com

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:

To help the County be the BEST it can be!

Is this application for a re-appointment? ☐ Yes ☒ No

➤ 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:

Have you ever worked for the Charlotte County Board of County Commissioners? ☐ Yes ☒ No

➤ 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? ☒ Yes ☐ No

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Have you ever been convicted of a Felony or Misdemeanor? (Please be sure you understand the question, as failure to answer truthfully will disqualify you). ☐ Yes ☒ No

➤ If “Yes”, please explain: _____

Have you ever pled NO LO CONTENDRE or pled guilty to a crime which is a Felony or a Misdemeanor? (Please be sure you understand the question, as failure to answer truthfully will disqualify you). ☐ Yes ☒ No

➤ If “Yes”, please explain: _____

- 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 attend two (2) meetings in a rolling twelve-month period shall automatically forfeit their appointment.

By signing this application, you acknowledge that you have read and understand the previous statements.

Shawn J
Signature

09/09/2020

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 Public Works
Municipal Service District Representatives
7000 Florida Street
Punta Gorda, FL 33950

OR EMAIL TO:

MSBU-TU@CharlotteCountyFl.gov

Shawn Joannes

Experience

1978–1986

Firefighter • Served as a on call Firefighter as well as an EMT and Rescue Diver • Grafton Fire Department

01 – 1986 – 04 - 2009

Fire Heavy Equipment Operator / Firefighter • I was the Driver of the 26th Busiest Truck (Ladder Truck) in the United States. I was A Paramedic for 6 years. I was an EMT from 1978 until 2013. I was on the Dive Rescue Team for the entire time I was on the Fire Department. For 4 years I was the Union Steward (That was the term limit) • City of Milwaukee Fire Department

2002–2020

Security Guard • Guard at Gated Comm. • Shield

Working for the Fire Department and serving the people for Milwaukee in their worst of times was my Greatest Accomplishment!

Education

Completed High School and for the entire time I was a Fire Heavy Equipment Operator / Firefighter I took classes at MATC the local collage, Milwaukee, Wisconsin

- Taking classes in Fire firefighting, Emergency Medicine, and Water Rescue

Communication

I do not mind talking to people or in front of people. I have never minded giving speeches.

Leadership

Since my wife Jami and I have moved here almost 10 years ago we have joins in efforts to help people in times of need, as in after Hurricanes, heavy rains.

- I am also the President of the Northwest Port Charlotte Community League!

References

Jami Joannes 262.613.9111

Rick Tracy Snider 941.764.8780



Contact

380 Cory Street
Port Charlotte, Florida 33953-1219

Home – 941.629.**FIRE**(3473)
Cell – 414.419.**FIRE**(3473)

FireLap343@gmail.com
NorthwestPortCharlotteCL@gmail.com

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