CITY OF POMPANO BEACH OFFICE OF THE CITY CLERK



CITY OF POMPANO BEACH ADVISORY BOARD / COMMITTEE APPLICATION

2017 APR 11 AM 11:33

City Clerk's Office Phone: 954-786-4611 Fax: 954-786-4095 Post Office Drawer 1300, Pompano Beach, FL 33061 www.pompanobeachfl.gov

Mr Mrs Ms. Miss (Optional)	Name: Shakun Stu	one-Walker
Residence Information: Home Address: 300	NW 2nd St.	A Company of the Comp
	10 Beach, FL 33	0100
Home Phone:	Cell Pho	ne: 954-224-7777
Email: Sharon a ther	Cell Pho	-
Business Information	Cultural Arts Creat	
Business Address: 1955	N. Fecteral House	y Ste# 108 Developend
City/State/Zin: Dayon on E	Beach, FL 33062	1 000
		- d Ou
Business Phone:	Fax:	Email: Sharona the creatic
		OV (
Are you a U.S. Citizen? Yes 🗸		
Are you a resident of Pompano E	Beach? Yes No R	eside in District: 1 2 3 4 5
De veu eur real record à Dec	5 10 V	eside in District: 1_2_3_4\frac{1}{2}5_
		The state of the s
Are you a registered voter? Yes	No	
Have you ever been convicted of	f a falany? Vaa	
Trave you ever been convicted of	ratelony? resNo_V	
Current or prior service on gover	nmental boards and/or committees:	
Please make a check next to the	Adyisory Boards/Committees you we	ould like to serve on:
Affordable Housing	Cultural Arts	Parks and Recreation
Air Park	Education	*Planning & Zoning/Local Planning
Architectural Appearance	Emagrapa Madical Cardens	Agency
Architectural Appearance	Emergency Medical Services	*Police & Firefighter's Retirement
Nuisance Abatement Board	*Employee's Board of Appeals	System Pompano Beach Economic
		Development Council
Charter Amendment	Employee's Health Insurance	Public Art Committee
Community Appearance	*General Employee's Retirement	Recycling & Solid Waste
#Community	System	Sand & Spurs Riding Stables
*Community Development(CDAC)	Golf	Marine
CRA East	Historic Preservation	*Unsafe Structures
GRA West	*Housing Authority of Pompano Beach	*Zoning Board of Appeals
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*Financial Disclosure Form is required, if appoint	ted to serve, upon appointment and upon resignation/retirement.
In addition	n a Resume may be attached
Education:	d de la constant de l
Experience:	
Past Positions:	
lobbies:	
	•
Making any false statements herein n any appoin	may be cause for revocation by the City Commission of trent to a Board/Committee.
Signature: L	Date: 9/30/2016
nitials of Clerk or Deputy:	
	Date received or confirmed: 4
Please check one:New Application	Currently Serving on Board Updated Information
Note: Application is effective for one year from date of c 954-786-4611, or send via fax to: 954-786-4095.	completion. If you have any questions on the above, please call the City Clerk's Office at
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