



CITY OF POMPANO BEACH ADVISORY BOARD / COMMITTEE APPLICATION

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

Mr. ___ Mrs. ___ Ms. ___ Miss **Name:** Tashawna Thomas
 (Optional)

Residence Information:

Home Address: 475 SE First St
 City/State/Zip: Pompano Beach, FL, 33060
 Home Phone: 9547339627 Cell Phone: 9545600910
 Email: shawnie4r@gmail.com Fax: _____

Business Information:

Employer/Business Name: N/A
 Current Position / Occupation: N/A
 Business Address: N/A
 City/State/Zip: N/A
 Business Phone: N/A Fax: N/A Email: N/A

Are you a U.S. Citizen? Yes No
 Are you a resident of Pompano Beach? Yes No Reside in District: 1 2 3 4 5
 Do you own real property in Pompano Beach? Yes No
 Are you a registered voter? Yes No
 Have you ever been convicted of a felony? Yes No
 Current or prior service on governmental boards and/or committees: N/A

Please check the first box next to the Advisory Boards/Committees you would like to serve on:

<input type="checkbox"/>	Affordable Housing	<input checked="" type="checkbox"/>	Education	<input checked="" type="checkbox"/>	Parks and Recreation
<input type="checkbox"/>	Air Park	<input type="checkbox"/>		<input type="checkbox"/>	*Planning & Zoning/Local Planning Agency
<input type="checkbox"/>	Architectural Appearance	<input type="checkbox"/>	Emergency Medical Services	<input type="checkbox"/>	*Police & Firefighter's Retirement System
<input type="checkbox"/>	Charter Amendment	<input type="checkbox"/>	*Employee's Board of Appeals	<input type="checkbox"/>	Pompano Beach Economic Development Council
<input type="checkbox"/>	Community Appearance	<input type="checkbox"/>	Employee's Health Insurance	<input type="checkbox"/>	Public Art Committee
<input checked="" type="checkbox"/>	*Community Development	<input type="checkbox"/>	*General Employee's Retirement System	<input checked="" type="checkbox"/>	Recycling & Solid Waste
<input type="checkbox"/>	CRA East	<input type="checkbox"/>	Golf Advisory Board	<input type="checkbox"/>	Sand & Spurs Riding Stables
<input type="checkbox"/>	CRA West	<input type="checkbox"/>	Hillsboro Inlet District	<input type="checkbox"/>	Marine
<input checked="" type="checkbox"/>	Cultural Arts	<input checked="" type="checkbox"/>	Historic Preservation	<input type="checkbox"/>	*Nuisance Abatement Board
<input type="checkbox"/>		<input type="checkbox"/>	*Housing Authority of Pompano Beach	<input type="checkbox"/>	*Unsafe Structures
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	*Zoning Board of Appeals

***Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.**

In addition a Resume may be attached

Education: Bachelor's Degree in Interdisciplinary Studies; knowledgeable in physics, environmental science, biology
communicative skills, analytical math, critical inquiry, computer programming, data analysis, ethics, and other science-related topics.

Experience: Over 5 years of experience in environmental research and analysis, developing and maintaining
databases, producing project materials such as videos, case studies and visual presentations, and leadership.

Past Positions: Executive Director, Procurement Specialist, Student Researcher, Team Leader, & Summer Camp Counselor

Hobbies: My hobbies include: yoga, music, volunteering, environmental education, nature walks,
beach clean ups, youth coaching, and meditation.

Making any false statements herein may be cause for revocation by the City Commission of any appointment to a Board/Committee.

Signature: 

Date: May 14th, 2024

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

Please check one: New Application Currently Serving on Board Updated Information

Note: Application is effective for one year from date of completion. If you have any questions on the above, please call the City Clerk's Office at: 954-786-4611, or send via fax to: 954-786-4095.



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Mr. ___ Mrs. ___ Ms. Miss ___ Name: Melissa Banner
(Optional)

Residence Information:

Home Address: 841 NW 4th Avenue
City/State/Zip: Pompano Beach, Fl. 33060
Home Phone: N/A Cell Phone: 954-822-3144
Email: melissabanner70@gmail.com Fax: _____

Business Information:

Employer/Business Name: School Board of Broward County/ Local Love, Corp.
Current Position / Occupation: Community Liaison/ Non-Profit Founder
Business Address: 1400 NW 14th Court /841 NW 4th Avenue
City/State/Zip: Ft. Lauderdale, Fl. 33311 Pompano Beach, Fl. 33060
Business Phone: 754-321-1567 Fax: _____ Email: melissabanner70

Are you a U.S. Citizen? Yes No
Are you a resident of Pompano Beach? Yes No Reside in District: 1 2 3 4 5
Do you own real property in Pompano Beach? Yes No
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Current or prior service on governmental boards and/or committees: _____

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In addition a Resume may be attached

Education: Blanche Ely High School - Graduated 1987

Florida A & M University - Graduated

Experience: _____

Past Positions: None with the City of Pompano, I have however,
have the following committee experience - Attendance Committee -Broward Schools , Homeless Children and Youth

Sub committee- Broward County, Broward Aware Planning Committee - Children Services Council

Hobbies: Reading & Exploring

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Signature: Melissa Barner

Date: 2/22/2024

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

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Mr. ___ Mrs. ___ Ms. X Miss ___ **Name:** Carolyn Rhone
 (Optional)

Residence Information:

Home Address: 780 NW 23 ter
 City/State/Zip: 33069
 Home Phone: 954-972-7295 Cell Phone: same
 Email: azurefl@aim.com Fax: _____

Business Information:

Employer/Business Name: _____
 Current Position / Occupation: retire
 Business Address: _____
 City/State/Zip: _____
 Business Phone: _____ Fax: _____ Email: _____

Are you a U.S. Citizen? Yes No
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In addition a Resume may be attached

Education: Blanche Ely High Pompano Bch , FL

University Hosp Fort Lauderdale.FL

Sterile Processing Technology 1983

Experience: 40 year

Equipment Testing. Ordering Supplies.

Past Positions: Commissioner Of the Housing Authority of Pompano Bch. Surgical Support Specialist.

Hobbies: CERT TEAM, COP TEAM

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Signature: _____

Date: 4-27-24

Initials of Clerk or Deputy: _____

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