



CITY OF POMPANO BEACH
ADVISORY BOARD / COMMITTEE
APPLICATION

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

2014 DEC 15 PM 1:13
CITY OF POMPANO BEACH
OFFICE OF THE CITY CLERK

Mr. X Mrs. Ms. Miss Name: Woodrow J. Poitier
(Optional)

Residence Information:

Home Address: 901 N.W. 4th Ave
City/State/Zip: Pompano Beach, FL 33060
Home Phone: (954) 943-7282 Cell Phone: (954) 464-5160
Email: Wpoitier@poitierfuneralhome.com Fax: (954) 943-0994

Business Information:

Employer/Business Name: W.C. Poitier Funeral Home
Current Position / Occupation: LICENSE FUNERAL DIRECTOR / OWNER
Business Address: 317 N.W. 6 St.
City/State/Zip: Pompano Beach, FL 33060
Business Phone: 954-943-7050 Fax: 954-943-0994 Email:

Are you a U.S. Citizen? Yes X No

Are you a resident of Pompano Beach? Yes X No Reside in District: 1 2 3 4 X 5

Do you own real property in Pompano Beach? Yes X No

Are you a registered voter? Yes X No

Have you ever been convicted of a felony? Yes No X

Current or prior service on governmental boards and/or committees: Ex-City Comm.
Housing Authority Bd; Emergency Med. Services

Please make a check next to the Advisory Boards/Committees you would like to serve on:

Table with 3 columns: Affordable Housing, Cultural Arts, Parks and Recreation, etc. Includes checkboxes for various committees like Emergency Medical Services, Housing Authority of Pompano Beach, etc.

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

In addition a Resume may be attached

Education: A.S Degree Mortuary Science - Miami-Dade College
1971

Since - 1971

Experience: Funeral Director / Embalmer ; City Commissioner
6yrs 2mos. FFTR / Paramedic, City of Pompano 23 1/2yrs
Comm. City of Pompano Housing Authority 6yrs

Past Positions: EMS Advisory Bd.
" Refer to Experience "

Hobbies: Reading, Fishing

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

Signature: Woodrow J Poitier

Date: Dec 12 2014

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.

CITY OF POMPANO BEACH, FLORIDA
BOARD/COMMITTEE APPLICATION

City Clerk's Office
Post Office Drawer 1300
Pompano Beach, Florida 33061

Phone No. (954) 786-4611

IN ORDER TO ASSIST THE CITY COMMISSION IN MAKING MUNICIPAL BOARD AND COMMITTEE APPOINTMENTS, THE FOLLOWING INFORMATION IS REQUESTED:

NAME OF BOARD/COMMITTEE: E.M.S.

NAME OF APPLICANT: FRANK DESIDERIO

RESIDENCY ADDRESS: 806 CYPRESS GROVE LN APT. 509

ZIP CODE: 33069 HOME PHONE NO.: 954 979-6985

MAILING ADDRESS: SAME AS ABOVE

CITY/STATE/ZIP CODE: _____

ARE YOU A CITY RESIDENT? YES: X NO: _____

IF YES PLEASE INDICATE DISTRICT YOU RESIDE IN: 1- 2- 3- 4- 5- X

DO YOU OWN REAL PROPERTY IN POMPANO BEACH? YES: X NO: _____

ARE YOU A REGISTERED VOTER? YES: X NO: _____

BUSINESS OR OCCUPATION: AGENT - REAL ESTATE

BUSINESS ADDRESS: BALISTRERI 3099 EAST COMMERCIAL BLVD

CITY/STATE: FORT LAUDERDALE, FL 3

ZIP CODE: 33308 BUSINESS PHONE NO. 954 489-3188

ARE YOU PRESENTLY SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? NO

IF YES, PLEASE LIST NAME: _____

OK
M

WOULD YOU CONSIDER SERVING ON ANY OTHER CITY BOARD OR COMMITTEE? YES

IF YES, PLEASE LIST NAME:

HAVE YOU EVER SERVED ON A CITY OF POMFANO BEACH BOARD/COMMITTEE: NO

IF YES, PLEASE STATE NAME OF BOARD OR COMMITTEE: _____

PLEASE LIST THE FOLLOWING BACKGROUND INFORMATION WHICH WOULD QUALIFY YOU TO SERVE ON THIS BOARD OR COMMITTEE:

EDUCATION: ST. PIUS II NYC AVIATION HS. NYC. MASSA CC. LE NY
MASSA FLYERS INC., NYC FIRE ACADEMY, NYS TRUCK INST.

EXPERIENCE: COMMERCIAL PILOTS LIC. (INST. RATED) NYC FIREFIGHTER (21 YRS)
CABLE SPICER (CON EDISON NYC ELECTRIC)

CURRENT POSITION: AGENT (REAL ESTATE)

PAST POSITIONS: _____

TRAINING. EXERCISE, FLYING

MAKING ANY FALSE STATEMENTS HEREIN MAY BE CAUSE FOR REMOVAL BY THE CITY COMMISSION:

Frank Diiodin
SIGNATURE OF APPLICANT

3/3/08
DATE OF APPLICATION

INITIALS OF CLERK OR DEPUTY

DATE RECEIVED OR CONFIRMED

NOTE: IF YOU DO NOT WISH TO SERVE ON THIS BOARD OR COMMITTEE, PLEASE EITHER CHECK HERE AND RETURN TO CITY CLERK, OR NOTIFY THE CITY CLERK'S OFFICE IN WRITING OF YOUR DESIRE NOT TO SERVE.

THIS SECTION MUST BE COMPLETED BY THE ADVISORY BOARD SECRETARY ONLY

NUMBER OF MEETINGS HELD: _____ NUMBER OF MEETINGS ATTENDED: _____



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www.pompanobeachfl.gov

2021 JUN 29 PM 2: 23
 CITY OF POMPANO BEACH
 OFFICE OF THE CITY CLERK

Mr. Mrs. Ms. Miss
 Name: Dan Debrecht
 (Optional)

Residence Information:

Home Address: 607 SE 10
 City/State/Zip: Pompano Beach FL 33060
 Home Phone: 954 650 5759 Cell Phone: 954 5759
 Email: ladder87@comcast.net Fax: _____

Business Information:

Employer/Business Name: Reva Air Ambulance
 Current position Flight Medic
 Occupation: Flight Medic. Retired Fire Rescue Captain
 Business Address: 1745 NW 51 Place
 City/State/Zip: Ft Lauderdale FL 33309
 Business Phone: 954 730 8300 Fax: _____ Email: _____

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: No

Please make a check next to the Advisory Boards/Committees you would like to serve on:

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

CRA East	Hillsboro Inlet District	*Unsafe Structures
CRA West	Historic Preservation	*Zoning Board of Appeals
Local Complete Count (Temporary)	*Housing Authority of Pompano Beach	
*Financial Disclosure Form is required, if appointed to serve, upon appointment and upon resignation/retirement.		

In addition a Resume may be attached

Education: Pompano Beach HS Grad. State Certified Firefighter State Certified Paramedic. State Certified Fire Officer1 ACLS PALS

Experience: Currently Flight Medic Reva Air Ambulance. 1992-2019 Oakland Park Fire Rescue Captain/Battalion Chief Retired. 1990-1992 Royal Palm Beach Fire Rescue Firefighter/Paramedic. 1988-1990 Bethesda Ambulance EMT/Paramedic

Past Positions: As above

Hobbies: Coaching HS Baseball. Fishing. Physical Fitness

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Signature: Dan Debrecht _____

Date: 6/27/21

Initials of Clerk or Deputy: _____

Date received or confirmed:

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

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Daniel G. Debrecht

607 SE 10thst Pompano Beach, FL 33060 • 954-650-5759 • ladder87@comcast.net

STRENGTHS:

- 31 years of both Fire & EMS experience in a busy South Florida metro fire department
- Self-driven, compassionate, and motivated to continue to excel in all aspects of this career
- Passion for training and mentoring others in the fire service

RELATIVE PROFESSIONAL EXPERIENCE

Oakland Fire Rescue Department

Acting Battalion Chief - Captain / Paramedic – Operations Division 1992 – 2020

- Supervisory position directing activities of a fire company on an assigned shift
- Responsible for the discipline of subordinates, proper maintenance of a fire station, apparatus, and equipment, & training personnel in Fire & EMS
- Field Training Officer for new probationary officers

Village of Royal Palm Beach

Firefighter / Paramedic

Palm Beach, FL

1990 – 1992

Bethesda Ambulance Service

Paramedic

Palm Beach, FL

1988 – 1990

EDUCATION

Florida State Fire College

State of Florida Pump Operator

Ocala, FL

1999

South-Tech Fire Academy

State of Florida Pump Operator

State of Florida Paramedic.

State of Florida Emergency Medical Technician.

State of Florida Minimum Standards

Emergency Vehicle Operations Certifications.

Boynton Beach, FL

1994

1992

1988

1988

1988

CERTIFICATIONS

- State of Florida Fire Officer I
- State of Florida Minimum Standards
- State of Florida Paramedic
- State of Florida Emergency Medical Technician
- State of Florida EVOC
- State of Florida Pump Operator / Hydraulics
- BLS / ACLS / PALS Certified
- National Incident Management System (NIMS) 100-700

ACCOMPLISHMENTS & ACCOLADES

- 2019 Lifetime Career Achievement Award – City of Oakland Park
- 2010 Broward Health Trauma Services Paramedic of the Year
- 2010 Firefighter of the Year – City of Oakland Park
- 2008 Firefighter of the Quarter – City of Oakland Park
- 2005 Firefighter of the Year – City of Oakland Park
- 2005 Firefighter of the Quarter – City of Oakland Park
- 2000 – Above & Beyond Call of Duty – City of Oakland Park *Department's highest honor award*



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www.pompanobeachfl.gov

Mr. ___ Mrs. X Ms. ___ Miss ___ Name: Denise Searle
 (Optional) _____

Residence Information:

Home Address: 2821 NE 9th Ct
 City/State/Zip: Pompano Beach
 Home Phone: _____ Cell Phone: 9542900168
 Email: Denisesearle7@gmail.com Fax: _____

Business Information:

Employer/Business Name: Self Employed
 Current Position / Occupation: Realtor
 Business Address: 2821 NE 9th Ct
 City/State/Zip: Pompano Beach
 Business Phone: 9547885728 Fax: _____ Email: _____

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: _____

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

<input checked="" type="checkbox"/> Affordable Housing	<input type="checkbox"/> Education	<input type="checkbox"/> Parks and Recreation
<input type="checkbox"/> Air Park	<input type="checkbox"/> Emergency Medical Services	<input type="checkbox"/> *Planning & Zoning/Local Planning Agency
<input type="checkbox"/> Architectural Appearance	<input checked="" type="checkbox"/> *Employee's Board of Appeals	<input checked="" type="checkbox"/> *Police & Firefighter's Retirement System
<input type="checkbox"/> Charter Amendment	<input type="checkbox"/> Employee's Health Insurance	<input type="checkbox"/> Pompano Beach Economic Development Council
<input checked="" type="checkbox"/> Community Appearance	<input type="checkbox"/> *General Employee's Retirement System	<input type="checkbox"/> Public Art Committee
<input checked="" type="checkbox"/> *Community Development	<input type="checkbox"/> Golf Advisory Board	<input type="checkbox"/> Recycling & Solid Waste
<input checked="" type="checkbox"/> CRA East	<input type="checkbox"/> Hillsboro Inlet District	<input type="checkbox"/> Sand & Spurs Riding Stables
<input type="checkbox"/> CRA West	<input type="checkbox"/> Historic Preservation	<input type="checkbox"/> Marine
<input type="checkbox"/> Cultural Arts	<input type="checkbox"/> *Housing Authority of Pompano Beach	<input type="checkbox"/> Nuisance Abatement Board
<input type="checkbox"/>		<input type="checkbox"/> *Unsafe Structures
<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: Educated in England, moved to USA in 1995

Experience: In the UK sales

Past Positions: Teacher assistant at American Heritage 1997-2001
Staffing agent for Talent Tree Staffing 2001-2004
Real Estate Agent & Receptionist 2004- current

Hobbies: Traveling, looking after Grandchildren!

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Signature: 

Date: 3/14/24

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

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

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**CITY OF POMPANO BEACH
ADVISORY BOARD / COMMITTEE
APPLICATION**

CITY OF POMPANO BEACH
OFFICE OF THE CITY CLERK

2024 MAR 19 PM 1:45

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: Byron Schortinghouse
(Optional)

Residence Information:

Home Address: 1009 NE 6th ST.
City/State/Zip: Pompano Beach, FL 33060
Home Phone: N/A Cell Phone: 480-234-7952
Email: bschortinghouse@aol.com Fax: _____

Business Information:

Employer/Business Name: Church of The Nazarene
Current Position / Occupation: Retired / Minister - Dist. Superintendent
Business Address: 916 NE 4th ST.
City/State/Zip: Pompano Bch, FL 33060
Business Phone: 954-942-6010 Fax: _____ Email: PompanoNaz.org

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: CBRT

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

<input type="checkbox"/>	Affordable Housing	<input type="checkbox"/>	Education	<input 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 checked="" 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 type="checkbox"/>	*Community Development	<input type="checkbox"/>	*General Employee's Retirement System	<input 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 type="checkbox"/>	Cultural Arts	<input 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

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In addition a Resume may be attached

Education: Trevecca Nazarene University (Nashville)
Religion / Speech Communication
Asia/Pacific Nazarene Theologic Seminary (Miami FL)
Experience: Pastor - Missionary - Administration
University Board Member = 3 Universities

Past Positions: So. Fla. Dist. Superintendent of Church
Oversight - Arizona Superintendent
Asia Pacific Regional Administration

Hobbies: Gardening - Travel - Fishing

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

Signature: Byron Montgomery

Date: 3-18-2023

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

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

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www.pompanobeachfl.gov

Mr. ___ Mrs. ___ Ms. Miss ___ Name: Joanne Luia
(Optional)

Residence Information:

Home Address: 161 SE 8 St
City/State/Zip: Pompano Beach
Home Phone: Cell Phone: 954-804-5204
Email: Mabete1970@gmail.com Fax:

Business Information:

Employer/Business Name: Broward Health Medical Center
Current Position / Occupation: RD
Business Address: 1608 S. Andrews Ave
City/State/Zip: FT. Lauderdale
Business Phone: 954-355-4400 ^{6NT} Fax: Email: JLuia@broward
Health.org

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: FIPAC

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

<input type="checkbox"/>	Affordable Housing	<input type="checkbox"/>	Education	<input 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 checked="" 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 type="checkbox"/>	*Community Development	<input type="checkbox"/>	*General Employee's Retirement System	<input 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 type="checkbox"/>	Cultural Arts	<input 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: _____

Experience: _____

Past Positions: _____

Hobbies: volunteering, exercise, people

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Signature: Joanne Lucia

Date: 3-14-24

Initials of Clerk or Deputy: _____

Date received or confirmed: _____

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

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Resume

Joanne Puia

161 SE 8 Street

Pompano Beach, Florida 33060

March 2024

Education

2006-2008-Nova Southeastern University MHS

2002-2004-University of Phoenix BSN

1968-1970-SUNY-Rockland AAS

Emploment:

2021-present-Broward Health medical Center Discharge Callbacks/Telehealth (Part Time)

2016-2021-VITAS Hospice Visiting Home Care (Part time)

2003-2016-Broward Health Medical Center Palliative Care, Trauma Administration (Retired)

Volunteer

Florida Injury Prevention Committee

St. Coleman Women's Club-Board Member

CERT-Pompano Beach

Ladies Auxiliary-Post 142



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 www.pompanobeachfl.gov

Mr. ___ Mrs. ___ Ms. ___ Miss ___ Name: Patricia Kay McGill AKA P. Kay
 (Optional)

Residence Information:

Home Address: 1131 S.W. 3 Terrace.
 City/State/Zip: Pompano Beach, FL 33060
 Home Phone: _____ Cell Phone: 954-629-1274
 Email: PKay18@bellsouth.net Fax: _____

Business Information:

Employer/Business Name: Broward Health
 Current Position / Occupation: per diem RN
 Business Address: _____
 City/State/Zip: _____
 Business Phone: _____ Fax: _____ Email: _____

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: None

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

<input type="checkbox"/>	Affordable Housing	<input type="checkbox"/>	Education	<input 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 checked="" 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 type="checkbox"/>	*Community Development	<input type="checkbox"/>	*General Employee's Retirement System	<input 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 type="checkbox"/>	Cultural Arts	<input 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

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In addition a Resume may be attached

Education: _____

Experience: _____

Past Positions: _____

Hobbies: camping, crochet, sewing, gardening, travel,

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Signature: Patricia K. McGill

Date: 3-12-24

Initials of Clerk or Deputy: AC

Date received or confirmed: 3/12/24

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

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PATRICIA K. MCGILL (AKA-P.KAY)

954-629-1274

pkay18@bellsouth.net

1131 SW 3rd Terrace
Pompano Beach, FL
33060

PROFILE

I was honored to be a housewife while my kids were in school. In the early 1990's I obtained my Licensed Practical Nurse (LPN) and went on to get my Registered Nurse (RN). From approximately 1969-1980's was a Den Mother, Girl Scout Leader and trainer. If appointed to the EMS advisory board I will be willing to learn the position, offer input and help where needed.

EXPERIENCE

2023 to present: Patriot Academy certified coach-present Constitution programs to local venues, home groups, church and Burrie Center in Pompano

2022-present: CERT trained with City of Pompano and leader qualified

1997-present: RN at Imperial Point Medical Center (BHIP) Worked Medical/ surgical floor; Emergency Room (2000-2013).retired 2013 but working now per diem at Same Day Surgery at BHIP

1993-1997 North Broward Medical Center on Pediatric Floor as LPN

1966-1968 Pompano Beach Junior High as Large Class Secretary

1964-1966 Greenstein Trucking Company-Clerical

EDUCATION

1996-1997 —Broward Community College Registered Nurse Program AS degree LPN-RN transition (accelerated program)

1993-1993- Practical Nurse program at Atlantic Vocational

1963 Graduated from Pompano Beach High School.

SKILLS

My experience as a nurse and especially in the Emergency Department has enhanced my compassion and training.. I learned thru experience to work under stressful conditions. We trained for-the what ifs--- Antrax, major disasters, and many more drills involving the hospital. I was trained to do charge nursing in the ER, have maintained my ACLS, o obtained my Certified Emergency Nurse (not active now), served on Nurse Practice Council

Shining Star at BHIP; multiple positive letters from patients