

Town of Montverde Florida Application to be considered for Appointment to Town Council

All information must be provided in order to be conside	red. Please type or provide an easy-to-read print.
Name:	Telephone:
email address:	Occupation:
Home Address:	
Do you reside within the Town limits of Montverde? Yes	s No how long?
Are you a registered voter in Lake County: Yes	No
I am available for meetings on Tuesdays between the h	nours of 6:30 PM and 10:30 PM Yes No
Are you available for special meetings that may occur o	on other days? Yes No
Please explain any relevant experience that would qua	lify you to serve on the Town Council:
Do you currently serve on any other boards: Non-profit please provide your position and duties as a board mer	



Explain why you want	to serve on the Town Council:	
If you were appointed,	, explain what your short-term and long-term	n goals are as a Council member.
		o verify all information provided and I further
	of any information by those in possession of that all information provided herein is true ar	
Signature:	Printed Name	Date:

All applications must be submitted to the Town Clerk by the above deadline. Town Hall is closed on Fridays, weekends, and all major holidays.

Please be advised, Florida has a very broad public records law. Most written communications to or from government officials regarding government business are public records available to the public and media upon request. Your application, email communication, or other written communications may therefore be subject to public disclosure.

If you require special accommodations due to a disability to participate in the application/selection process, you must contact the Town Clerk in advance the application deadline.