

**Staff Use Only:**

Council District \_\_\_\_\_

This application is a

Reappointment

New Appointment

# GREENVILLE COUNTY BOARDS AND COMMISSIONS APPLICATION

MUSEUM COMMISSION

(Name of Board or Commission to which you are applying)

An individual may only apply to serve on one board or commission during any election cycle.

In order for your application to be given consideration, it is critical that you answer all of the following questions as completely as possible.

Mr  Mrs  Ms  Miss Name HARRY B. USSERY

Home Address 27 ROCKY CREEK LANE City GREENVILLE

Zip 29615 Home Phone 864-288-3704 Work Phone 864-270-0165

Voter Registration Number 2347400 Email harry.ussery@gmail.com

**\*\*You must be registered to vote in Greenville County at the time of application**

Occupation EXECUTIVE - RETIRED

Employer N/A

EmployerAddress \_\_\_\_\_

Volunteer Experience \_\_\_\_\_

CHAIRMAN, MUSEUM COMMISSION

PRESIDENT, MUSEUM ASSOCIATION

CHAIRMAN, SOCIETY OF PLASTICS INDUSTRY

TREASURER, GOVERNOR'S SCHOOL FOUNDATION

DIRECTOR, GREENVILLE CHAMBER OF COMMERCE

Do you currently hold any elected or appointed office or commission No

If yes, list \_\_\_\_\_

Have you previously held any elected or appointed office or commission? Yes

If yes, list MUSEUM COMMISSION

Have you ever been fined for any ethics violations? No

If so, please comment  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe your understanding of the role of a member of the board or commission to which you are applying** \_\_\_\_\_  
I believe the role of the Museum Commission is to oversee the staff of the Museum of Art for the purpose of growing the art collection and improving the appreciation of art within the Greenville community. In addition, the Commission should ensure the fiscal well-being of the museum operation, and supervise the Executive Director.

Have you ever attended a meeting of this board or commission?  Yes  No

Are you available to meet at the regularly scheduled date and time of the board or commission meeting?  Yes  No

If appointed, will you pledge to faithfully attend the meetings?  Yes  No

How many hours/week are you available to give to this board of commission? 6

**What specific skills do you believe you could contribute as a member of this board or commission?** \_\_\_\_\_  
I served on the Commission and the Museum Foundation for almost twenty years, and therefore, bring significant historical knowledge of museum operations. My business experience as president of my own company, as well as a public company, prepared me in financial controls, operations, and human resources.

Highest Degree Earned B.S.

School Attended LA. TECH UNIVERSITY

Field Of Study CHEMICAL ENGINEERING

Do you have expertise in any of the following areas (check all that apply).

- |   |   |
|---|---|
| <input type="checkbox"/> Tourism Industry | <input type="checkbox"/> Architectural                                  |
| <input type="checkbox"/> Cultural / Arts  | <input type="checkbox"/> Fire Protection Eng / Contractor               |
| <input type="checkbox"/> Restaurant       | <input type="checkbox"/> Electrical Engineer / Contractor               |
| <input type="checkbox"/> Hotel Management | <input type="checkbox"/> Design/Architectural / Professional Contractor |
|   | <input type="checkbox"/> Structural Engineer / Contractor               |
|   | <input type="checkbox"/> Mechanical Engineer / Contractor               |
|   | <input type="checkbox"/> Plumbing Engineer / Contractor                 |

Have you ever been convicted of a crime other than a minor traffic violation? If so, please give details

Yes  No

Are you current in payment of Greenville County property taxes?

Yes  No

Do you reside in a municipality? If so, please name.

Yes  No

GREENVILLE COUNTY

Do you, any member of your family or a business with which you or a member of your family is associated, provide goods and/or services to this board for payment?

Yes  No

**Statement**

*By my signature, I state that all information contained in this application is true and accurate to the best of my knowledge.*

*I understand it is my responsibility to insure my application is submitted within the application period and that it has been received by the County Council Office.*

*I understand my appointment to the board for which I am applying will not result in me receiving any compensation for my service.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Recommended by \_\_\_\_\_

**Please return completed form to:**

**Greenville County Council  
301 University Ridge, Suite 2400  
Greenville, SC 29601-3665**

If you have questions, please call 467-7115 or check the [www.greenvillecounty.org](http://www.greenvillecounty.org) website.