

Staff Use Only:

Council District 26

This application is a

Reappointment

New Appointment

GREENVILLE COUNTY BOARDS AND COMMISSIONS APPLICATION

Disabilities & Special Needs Board

(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 Holland Webb

Home Address 609 Two Gait Lane City Simpsonville

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

Occupation Development

Employer Campbell Young Leaders

EmployerAddress 104 Broadus Avenue
Greenville, SC 29601

Volunteer Experience

Former Board Member: Greer Cultural Arts Council, The Anchorage, Greenville Lions' Club (president), Fairfield Art Walk (IA)

Previous Volunteer for the Salvation Army. Current volunteer for Kairos Prison Ministry, and active in children's ministry at Greenville First Church of the Nazarene.

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? No

If yes, list

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 _____
Board members provide programmatic and fiduciary oversight for the Greenville Disabilities & Special Needs Board. In this role, the board members work synergistically to develop, manage, staff, and evaluate the board's programs so that the services provided are of high quality and broadly available to county residents. The board members also promote the agency among its various constituencies in the Greenville area.

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? 5-10 hours

What specific skills do you believe you could contribute as a member of this board or commission? _____
I worked for seven years as a major donor fundraiser, grants manager, and program coordinator for CBM US. Located in Greenville, CBM US is the US arm of CBM, the world's oldest and largest organization serving people with disabilities around the world. I bring knowledge of the disability community and skills in fundraising, communication, program management, and grant management.

Highest Degree Earned Master of Arts

School Attended Regent University

Field Of Study Public Policy

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

Simpsonville

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 website.