		2.1
Council	District	21

This application is a:

Reappointment

New Appointment X

## GREENVILLE COUNTY BOARD AND COMMISSION APPLICATION for County-wide Boards

Name of Board or Commission to which you are applying: Darbilites Awo Sparing Man An individual may only apply to serve on one board or commission during any election cycle.
Mr.   Mrs.   Dr.   Name: Pam Childress Johnson
Home Address: 14 History Two Way City: Simprovile Zip: 29681
Occupation: 5Aks Employer: RHHS C. Dan Joyner
Employer Address: 3539 Diham Ri
School attended: Knows State University
Highest degree earned: MPA Field of Study: Which happens
Volunteer Experience (Please list and describe): See A HARM
Describe your understanding of the position for which you are applying.
What specific skills do you believe you could contribute as a member of this board or commission?

## Volunteer Experience:

- Roger C Peace Rehabilitation Hospital GHS. I am currently working with the staff and administration to develop and implement a peer support program for SCI patients and families both in and out patient.
- Neurology & Post-Acute Services Advancement Council-GHS. I serve as a member of this council to promote awareness and raise monies to support programs and Capital Campaign initiatives at GHS.

Describe your understanding of the position for which you are applying.

I understand this position is one that requires not only my time but also passion and commitment to ensuring that all citizens of Greenville County receive services, accessibility and opportunities that will contribute to healthy and productive lives.

What specific skills do you believe you could contribute as a member of this board or commission?

My daughter's SCI in late 2013 opened my eyes to a world we never knew nor ever thought we would know. I saw and have seen a great need for not only acceptance but also understanding of and for individuals with disables both physical and mental as well as access to services and support. We are very fortunate to live in a County that has been proactive in providing such support and services but more can always be done. I feel that my past experience working at both the municipal and state governmental levels and most of all my drive and passion as a parent make me a good fit for this position on the Board.

How many hours per week are you able to commit	to this board or commission? 20 T		
Have you ever attended a meeting of this board or	commission?	Yes No	
Are you available to meet at the regularly schedule commission meetings?	ed date and time of the board or	Yes₽ No□	
Do you, any member of your immediate family, or a business with which you or a family member is associated, provide goods and/or services to this board for payment?  If yes, please explain:		Yes No	
		- -	
Do you or any member of your immediate family relif yes, please explain:		Yes□ No⊡	
Have you ever been convicted of a crime other that If yes, please give details.		Yes No	
Do you <u>currently</u> hold any elected or appointed off If yes, please list	ice or commission?	Yes□ No⊡	
Have you <u>previously</u> held any elected or appointed if yes, please list	d office or commission?	- Yes⊡ No⊡-	
Have you ever been fined for an ethics violation? If yes, please explain:		Yes No	
Have you ever been subject to penalty relating to If yes, please explain:		- Yes⊡ No⊡-	
Are you current in payment of your Greenville County property taxes?		Yeş☑ No□	
the Construction Board of Appeals or	nmodations Tax Advisory Committed the Historic Preservation Commission field of employment or expertise	sion please check	
Accommodations Tax Comm.  Tourism Industry  Cultural / Arts  Restaurant  Hotel Management  Historic Preservation Comm.  Archeologist  Historian  Architect	Construction Board of Appeals  Architectural  Fire Protection Engineer /Contractor  Electrical Engineer /Contractor  Design/Architectural /Professional Contractor  Structural Engineer /Contractor  Mechanical Engineer /Contractor  Plumbing Engineer /Contractor		
□Member of Historic Preservation Group			

## Statement of Agreement and Understanding

By my signature, I attest 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.

I understand my lack of attendance resulting in three consecutive meetings or 25% of all meetings within a year may result in my removal from the board.

Signature |

Date 7-15-15

Please return completed form by mail, fax or email to:

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

Fax: (864) 467-7358

rmccaskill@greenvillecounty.org

If you have questions, please call 467-7115 or check the www.greenvillecounty.org website.