Staff Use Only:						
Council District	28	This application is a	Reappointment	X New Appointment		

## GREENVILLE COUNTY BOARDS AND COMMISSIONS APPLICATION

GREENVILLE COUNTY BOARDS AND COMMISSIONS APPLICATION	
Disabilities and 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 X Ms Miss Name Jade Cox	
Home Address 608 Willow Creek Court City Simpsonville	
**You must be registered to vote in Greenville County at the time of application	
Decupation Education Specialist	
Employer Described and Captioned Media Program	
EmployerAddress 1447 East Main Street	
Spartanburg, SC 29307	
Highest Degree Earned M.A.T.	
School Attended USC-Columbia	
Field Of Study Secondary Social Studies	
/olunteer Experience	
AmeriCorps Vista: SC Department of Juvenile Justice; served as Volunteer Coordinator	
Vriter's Workshop: Bethel Elementary; proofed and edited student writing	
utor for At-Risk Students: Middle and High School Level	
Describe your understanding of the role of a member of the board or commission to which you are applying	
The ultimate goal of the Disabilities and Special Needs Board is to ensure the voices of individuals with various disabilities are	
neard and that individual's needs as well as group needs are met. Members of this board will work with various individuals and	
organizations to implement and oversee policies and procedures that encourage and promote independence and inclusion.	
The Board also has a mission of visibility and education related to Disability Awareness and fostering partnerships.	
What specific skills do you believe you could contribute as a member of this board or commission? Currently, I work with a grant which provides captioned and described media deaf and blind students. As a teacher, I taught	
students with various disabilities. As a 504 Administrator and teacher, I ensured that qualifying students received additional	
supports or modifications in the education setting. On a personal level, I have an immediate family member who has cerebral	
palsy. I understand the importance of advocacy and looking for resources that are sometimes "out of the box."	

How many hours/week are you available to give to this board of commissission?		15-20		
Have you ever attended a meeting of this board or commission?		Yes	x	No
Are you available to meet at the regularly scheduled date and time of the board or commission meeting?	х	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?		Yes	x	No
Do you or any member of your immediate family receive direct services from this board?		Yes	x	No
Have you ever been convicted of a crime other than a minor traffic violation? If so, please give details		Yes	x	No
Do you <u>currently</u> hold any elected or appointed office or commission?		No		
If yes, list	_			
Have you <u>previously</u> held any elected or appointed office or commission?				No
If yes, list				
Have you ever been fined for any ethics violations?				
If so, please explain				
Have you ever been subject to penalty relating to a violation of State ethics standards If so, please explain	s?		No	

## If applying for the <u>Accomidations Tax Advisory Committee</u> the <u>Construction Board of Appeals</u> or the <u>Historic Preservation Commission</u> please check the box that applies to your field of employment or expertise:

Accommodations Tax Comm.	Construction Board of Appeals					
Tourism Industry	Architectural					
Cultural / Arts	Fire Protection Eng / Contractor					
Restaurant	Electrical Engineer / Contractor					
Hotel Management	Design/Architectural / Professional Contractor					
	Structural Engineer / Contractor					
Historic Preservation Comm.	Mechanical Engineer / Contractor					
Archeologist	Plumbing Engineer / Contractor					
Historian						
Architect						
Member of Historic Preservation Group						
·						
	<u>Statement</u>					
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.						
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					

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.