Staff Use Only:						
Council District	19	This application is a	Reappointment	x New Appointment		
			Attendance Record:			

How many hours/week are you available to give to this board of commissission?		8		
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?	x	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? No No				
Have you ever been subject to penalty relating to a violation of State ethics standard If so, please explain	ds?		No	
Are you current in payment of Greenville County property taxes?	х	Yes		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.	Con	struction 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				
X Historian						
Architect						
Member of Historic						
Preservation Group						
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.						
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.