

Staff Use Only:

Council District 26

This application is a

Reappointment

New Appointment

Attendance Record: _____

GREENVILLE COUNTY SPECIAL TAX DISTRICT APPLICATION

Canebrake

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

Eric Clayton

Home Address 346 South Harrison Bridge Road

City Simpsonville

Occupation Fire Officer/EMT

Employer City of Simpsonville

Employer Address

403 East Curtis Street

Simpsonville SC 29681

Volunteer Experience

I have volunteered in many areas including the fire service, community, and church work.

I have been apart of the volunteer fire service since 2001. I have been involved with several different fire departments.

Describe your understanding of the role of a member of the board or commission to which you are applying

This position would include helping the fire department achieve their goals and mission statement. Duties may include acquiring equipment and manpower Working with staff to recruit and retain personnel. Help personnel have the means to become proficient in their duties. Help the fire department maintain a healthy and obtainable budget that meets the needs of the community. Helping implement rules and regulations

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

I was part of the Future Business Leaders of America when I was in High School.

I was part of the student body for three years in college.

Have you ever been convicted of a crime other than a minor traffic violation?

Yes

No

If so, please give details

Do you currently hold any elected or appointed office or commission?

Yes

No

If yes, list

Have you ever been fined for any ethics violations?

Yes

No

If so, please comment

Have you ever been subject to penalty relating to a violation of State ethics standards?

Yes

No

If so, please explain

Do you, any member of your immediate 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

If so, please explain

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.