Staff Use Only:
Council District 26 This application is a Reappointment X 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.
X Mr Mrs Ms Miss Timothy Rose
Home Address 102 Watson Rd City Fountain Inn
Occupation Licensed Professional Engineer
Employer REMA
Employer Address
385 South Woods Drive
Fountain Inn, SC 29644
Volunteer Experience Grace Church, Worship Service Director direct audio/visual/band teams as part of weekly worship services program
Grace Church, Venture Leadership Mentor providing mentoring and coaching for applicants navigating career and life
decisions
Describe your understanding of the role of a member of the board or commission to which you are applying
Liaison between the County and the Fire District
Provide oversight to the Fire District; review and approve the operating budget
What specific skills do you believe you could contribute as a member of this board or commission?
Passion for the Southern Greenville County community and residents
Data driven decision making skills
Have you ever been convicted of a crime other than a minor traffic violation?
Have you ever been convicted of a crime other than a minor traffic violation? Yes X No

Do you <u>curr</u>	ently hold any elected or appointed office or commission?
lf yes, list	Technical Advisor of SC23H for US National Committee of IEC/American National Standards Institute
	Technical Advisor to (UL) Underwrites Laboratories Standards Technical Panel focused on mitigating fire
	and electrical shock risks for electric vehicle charging
Have you ev	er been fined for any ethics violations?
lf so, please	comment
Have you ev If so, please	er been subject to penalty relating to a violation of State ethics standards?
you or a me	member of your immediate family or a business with which mber of your family is associated, provide goods and/or Yes X No his board for payment?
If so, please	explain
	<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.