

APPLICATION FOR APPOINTMENT TO FLOOD PROTECTION AUTHORITY
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1. FULL LEGAL NAME (NO ABBREVIATIONS)

Mr.
Mrs. _____
Miss First Name Middle Name Last Name

Other names/Alias used: _____

2. Board which you are applying for:
Southeast Louisiana Flood Protection Authority East (SLFPAE) _____
Southeast Louisiana Flood Protection Authority West (SLFPAW) _____

3. Driver's License #: _____ 4. Date of Birth: _____

5. Social Security #: _____ 6. Name of Spouse: _____

7. Where are you registered to vote? Parish _____ Ward _____ Precinct _____
 Party Affiliation _____

**NOTE: The information below will assist in the goal of having broad representation of the community and is voluntary on your part.*

8. Race* _____ 9. Sex* _____

10. CONTACT INFORMATION

Home Address: _____
 Street City State Zip

Mailing Address: _____
 Street City State Zip

Home Phone: (_____) _____ Cell: (_____) _____

Fax: (_____) _____

Email: _____

11. CURRENT EMPLOYER

Company: _____ Title: _____

Address: _____

 City Parish State Zip

Phone: (_____) _____ FAX: (_____) _____

Email: _____

12. WORK EXPERIENCE (Current to last 10 years)

<u>Employer</u>	<u>Title/Type of Business</u>	<u>City/State</u>	<u>Date (From – To)</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

13. EDUCATION (Begin with highest grade)

<u>School (location)</u>	<u>Degree (year)</u>	<u>Major</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

14. LICENSES and CERTIFICATIONS

List any job-related licenses or certificates that you have, the date you were originally licensed, the licensing agency and expiration date (CPA, Registered Nurse, P.E., etc.)

1. _____
2. _____
3. _____

15. MILITARY SERVICE

List Branch, rank, dates of service, date and type of discharge

16. List all business, professional, government and educational boards, commissioned organizations and societies of which you are a current member:

17. _____ Yes _____ No Have you resided at your current residence less than 5 years? If yes, please list all residences for the past 5 years on a separate sheet of paper.
18. _____ Yes _____ No Are you a citizen or legal alien of the United States?
19. _____ Yes _____ No Have you been affiliated (as an officer, owner, director, trustee, partner, advisor or consultant) with any institutions (corporations, firms, partnerships, business enterprises, non-profit organizations, etc) within the past five years which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain on a separate sheet of paper.

20. Yes No Do you or a member of your immediate family own or have an interest or part in any business, company or entity conducting business of any kind with the authority or levee district within the territorial jurisdiction of the authority or any of the facilities controlled by the authority or any such district. If yes, please explain on a separate sheet of paper.
21. Yes No Do you own real property, personal property, or financial holdings which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain on separate sheet of paper.
22. Yes No Have you ever been convicted of a violation of any federal, state, parish or municipal law, regulation or ordinance (including traffic violations for which a fine of \$100.00 or more was imposed, this includes driving under the influence of alcohol and/or drugs)? If yes, please explain on separate sheet of paper.
23. Yes No Are you currently under federal, state or local investigation for possible violation of a criminal law or ordinance? If yes, please explain on a separate sheet of paper.
24. Yes No Have you ever been disciplined, cited, or sanctioned for a breach of ethics or unprofessional conduct by, or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain on separate sheet of paper.
25. Yes No Are there any pending complaints against you involving any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain on a separate sheet of paper.
26. Yes No Have you previously or do you currently serve as a member of any elected body? If yes, please list position and dates held on a separate sheet of paper.
27. Yes No Have you previously or are you currently a registered lobbyist? If yes, please list the name(s) of the agency or entity you lobbied and the principal(s) you represent.
28. Yes No Have you ever been employed as a public employee of the state or local government? If yes, please identify the employer(s) and the dates of employment on a separate sheet of paper.

29. Please briefly explain why you wish to serve on this board.

30. Are there any factors that may adversely impact your ability to serve on this board?

31. REFERENCES:

List four (4) individuals as references that you have worked directly for. Please give name, address and current phone numbers for each.

32. PLEASE ATTACH A COPY OF YOUR CURRENT RESUME'***

ACKNOWLEDGEMENT

Upon signing this application, I acknowledge that if appointed to the board for which I have applied, I shall not participate or engage in political activity to support or oppose the election of a candidate for political office; support a particular party or issue in an election; be a member of any national, state, or local committee of any political party or faction; make or solicit contributions for any political party, faction, candidate, or issue; or take active part in the management of the affairs of a political party, faction, candidate, or any political campaign, except to exercise my right as a citizen to express my opinion privately and to cast my vote as I desire.

Applicant Signature

Date

AUTHORIZATION AND RELEASE

I understand that in connection with this application for appointment to any board or commission an extensive investigation of my personal and business background may be conducted. I hereby authorize the release of any and all information pertaining to me or businesses in which I participated, including information of a confidential or privileged nature in the possession of government or private agencies or individuals. I hereby release all such agencies or individuals who furnish such information from liability for damages which may result from furnishing the information requested. I certify that the information on this form, provided by me, is true to the best of my knowledge and do hereby authorize any investigation of the answers I have provided.

Applicant Signature

Date