



# ADVISORY BOARD APPLICATION

CITY OF DORAL

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First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**City of Doral Resident**

- Yes
- No (If no, see below.)

In accordance with the City of Doral Code Section 2-116, *“in order to qualify to serve on an advisory board, an individual must be a resident of the City, be employed in the City and/or own a business in the City.”*

If you are not a resident of the City of Doral, please provide the name and address of your employer and/or of your business in the City.

Name \_\_\_\_\_ Address \_\_\_\_\_

The City of Doral currently has the following Advisory Boards:

- Animal Welfare Committee
- Citizens Audit Advisory Board
- Commission on the Status of Women
- Cultural Affairs Advisory Board
- Doral Parks Bond Oversight Committee
- Economic Development Advisory Board
- Environmental Advisory Board
- Faith and Community Based Organizations Advisory Board
- Military Affairs Advisory Board
- Parks & Recreation Advisory Board
- Police and Traffic Advisory Board
- Smart City Advisory Board
- Special Needs Advisory Board
- Youth Advisory Board



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For additional information on each Advisory Board and its functions, feel free to visit our website at <https://www.cityofdoral.com/government/advisory-boards/>

## Choice of Advisory Board

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

## Have you served on a City of Doral Advisory Board / Committee before?

*Please list the board(s) / committee (s) served below. If none, please write N/A.*

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## Qualification / Educational Background

*Briefly describe your specific expertise, experience and/or abilities relevant to your board choice(s).*

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## Community / Civic Organization You Are Affiliated With

*List the organization name, years of service (i.e. 2001-2002), and offices held (i.e. Chair, Member).*

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## Acknowledgement

I understand that in accordance with Florida Statutes Chapter 119, this information is a public record and therefore, is open to public inspection by any person.

If appointed, I agree to faithfully and fully perform the duties of my office and will comply with Florida Sunshine Law, the City of Doral Code, and the Miami-Dade County Code particularly pertaining to the conduct of public officials and the financial disclosure requirements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Application Submittal Instructions

This application is to be submitted along with your resume to the Office of the City Clerk via email at [cityclerk@cityofdoral.com](mailto:cityclerk@cityofdoral.com), by mail, or in person to the Office of the City Clerk located at 8401 NW 53 Terrace Doral, FL 33166.

Thank you for your interest in serving on an advisory board. This service is essential to the City's commitment to developing policies and services that reflects the needs of the community. You will be contacted prior to being appointed to a board.

For further questions, please call (305) 593-6730.