

**Charleston County Council**  
**4045 Bridge View Drive**  
**North Charleston, SC 29405-7464**  
**Tel: (843) 958-4030**  
**Fax: (843) 958-4035**

**APPLICATION FOR APPOINTMENT**

Please note that members of Charleston County boards and commissions must be residents of Charleston County.

The members of Charleston County Council will make every attempt to ensure broad representation of the community by appointing members from residential areas throughout the county, when appropriate.

**PLEASE TYPE OR PRINT CLEARLY.**

**APPOINTMENT SOUGHT:**

(Complete separate application for each position)

**NAME:**

**ADDRESS:**

**VOTER REGISTRATION NUMBER:**

**DATE OF BIRTH:**

**CURRENT EMPLOYMENT INFORMATION:**

OCCUPATION:

EMPLOYER:

BUSINESS ADDRESS:

**PHONE NUMBERS: (H)**

**(W)**

**E-MAIL ADDRESS:**

**CIRCLE ANSWER:**

Is there any way that you or a member of your family would stand to benefit financially by your service on this board or commission?	YES	NO
Have you ever been employed or had any involvement with this board or commission that would be reflected either positively or negatively in your service?	YES	NO
Have you ever been convicted of a crime involving moral turpitude?	YES	NO

**IF YOU ANSWERED "YES" TO ONE OR MORE OF THE ABOVE QUESTIONS, PLEASE EXPLAIN BELOW.**

PLEASE ANSWER THE QUESTIONS ON THE FOLLOWING PAGE IN ORDER TO GIVE THE MEMBERS OF CHARLESTON COUNTY COUNCIL MORE INFORMATION REGARDING YOUR INTEREST IN SERVING ON THIS BOARD OR COMMISSION. YOU ARE ENCOURAGED TO ATTEND THE COMMITTEE MEETING WHEN THIS APPLICATION IS CONSIDERED AND WILL BE NOTIFIED OF THE DATE AND TIME OF THAT MEETING IN ADVANCE. THE MEMBERS OF THIS COMMITTEE MAY ALSO DIRECT QUESTIONS TO YOU REGARDING YOUR APPLICATION AT THAT MEETING.

**Charleston County Council  
APPLICATION FOR APPOINTMENT**

Page 2

PLEASE TYPE OR PRINT CLEARLY. YOU MAY USE ADDITIONAL PAPER OR PROVIDE ADDITIONAL INFORMATION IF DESIRED. ALL INFORMATION YOU PROVIDE WITH THIS APPLICATION WILL BE GIVEN TO THE MEMBERS OF CHARLESTON COUNTY COUNCIL FOR CONSIDERATION.

**APPOINTMENT SOUGHT:**

(Complete separate application for each position)

**NAME:**

1. What experience/training/qualifications do you have for this particular board or commission?
  
  
  
  
  
  
  
  
  
  
2. What specific contributions do you hope to make to this board or commission?
  
  
  
  
  
  
  
  
  
  
3. Briefly describe your community service background or your involvement in community groups or activities.
  
  
  
  
  
  
  
  
  
  
4. What community topics concern you that relate to this board?
  
  
  
  
  
  
  
  
  
  
5. Why do you want to become a member of this board or commission?
  
  
  
  
  
  
  
  
  
  
6. Are you currently a member, or have you previously served on a Charleston County board or commission?  
If so, which one, and when did you serve?

DO YOU UNDERSTAND THAT, UNLESS OTHERWISE PROVIDED BY LAW, YOU SERVE AT THE PLEASURE OF COUNTY COUNCIL AND ALL APPOINTMENTS ARE SUBJECT TO THE ETHICS, GOVERNMENT ACCOUNTABILITY, AND CAMPAIGN REFORM ACT, S.C. CODE ANN. SECTION 8-13-10 ET SEQ, AND ANY MEMBER APPOINTED TO A BOARD OR COMMISSION WHOSE ACTION IS INCONSISTENT OR MAY BE PERCEIVED TO BE INCONSISTENT WITH THE SPIRIT OR INTENT OF THE ACT MAY BE SUBJECT TO REMOVAL?

BY SIGNING THIS DOCUMENT, YOU ACKNOWLEDGE THAT YOU MAY BE SUBJECT TO A BACKGROUND INVESTIGATION, INCLUDING, BUT NOT LIMITED TO A CRIMINAL HISTORY, DRIVING RECORD, AND CREDIT CHECK.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_