



Gubernatorial Appointments Form for General Information**

Governor's Appointments Office

(850) 717-9243 or Appointments@eog.myflorida.com

Date Completed

The information from this form will be used by the Governor's office and, where applicable, The Florida Senate in considering action on your confirmation. The form MUST BE COMPLETED IN FULL Answer "none" where appropriate. **Please print in black ink.**

Board of Interest: _____

Seat of Interest: _____

Full Name: Mr/Mrs./Ms. _____
(Last) _____ (First) _____ (Middle) _____

Have you ever been known by any other legal name? If "yes" please explain: _____

Home Address: _____
(Street) _____ (City) _____ (State) _____ (County) _____ (Zip) _____

Business Address: _____
(Street) _____ (City) _____ (State) _____ (County) _____ (Zip) _____

Mail to: Home Business Other Address: _____
(Street/P.O. Box) _____ (City) _____ (State) _____ (Zip) _____

E-mail Address: _____
(or write "NONE") _____

Sex: Male Female
Race: Asian
 Black or African American
 Native American or Alaska Native
 White

Cell Phone: _____ Home Phone: _____
(or write "NONE") _____ (or write "NONE") _____

Other: _____

Business Phone: _____ Extension: _____
(or write "NONE") _____

Florida Driver's License (or other State of Florida Issued ID): _____

Place of Birth: _____ Date of Birth: _____ / _____ / _____ Social Security Number: _____ / _____ / _____

Are you a United States citizen? Yes No If you are a naturalized citizen, date of naturalization: _____

Since what year have you been a continuous resident of Florida?: _____ Are you a registered Florida voter?: Yes No

County: _____ Current party Affiliation: _____

As a general matter, applications for appointment are public records, which may be requested by anyone; however, Florida law does provide some exemptions from the public records law for identifying information of certain covered individuals including their spouses and children.*** If you believe that an exemption from the public records law applies to your submission, please check the box below. By checking the box you are submitting a written request for the EOG to maintain the exemption of your identifying information as provided by law (see section 119.071(4)3., Florida Statutes).

Yes, I assert that my identifying information provided in this application is exempt from Florida's public records law.

If you need additional guidance as to the applicability of any public records law exemption to your situation, please contact the Office of the Attorney General:

The Office of the Attorney General
PL-01, The Capitol
Tallahassee, Florida 32399
(850) 245-0158

**This information will be used to provide demographic statistics and is not requested for the purpose of discriminating on any basis.

***Covered individuals include but are not limited to: current or former law enforcement officers, correctional and correctional probation officers, firefighters, service members serving after September 11, 2001, judges, assistant state attorneys, assistant and statewide prosecutors, assistant public defenders, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement, and certain investigators in the Department of Children and Families (see section 119.071, Florida Statutes).