

CITY OF OCALA

BOARD AND COMMISSION APPLICATION

REC'D CLERK'S OFFICE
2023 JAN 9 PM 8:48:28

Name: JANE CASANO Home Phone: 352-804-7144
Home Address: 520 SE WENONA AVE.
City, State, Zip Code: OCALA, FL 34471
Business: Retired Business Phone: _____
Business Address: _____

Occupation: Registered Nurse Email Address: _____

Brief Resume of Education and Experience: Registered Nurse since 1985
lives in Ocala presently retired. I have
served on the OHPAB Board for many years.

- Are you a Resident of Marion County? (If so, state length of time) Yes No
- Do you own property within the City limits? Yes No
- Do you reside within the City? Yes No
- Do you own a business within the City? Yes No
- Are you a registered City voter? Yes No
- Do you hold a public office? Yes No
- Are you employed by the City? Yes No
- At the present time, do you serve on a City Board, Commission, Authority, or Committee? Yes No

Please Note: A board/commission member shall not serve on more than one City board/commission at a time, unless that board/commission is an interim Ad Hoc Committee.

Please check the boards(s)/commission(s) you wish to serve on. If you have more than one interest, please number in order of your preference.

- | | |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| <input type="checkbox"/> - Affordable Housing Advisory Committee | <input checked="" type="checkbox"/> - Ocala Historic Preservation Advisory Board |
| <input type="checkbox"/> - Airport Advisory Committee | <input type="checkbox"/> - Ocala Housing Authority |
| <input type="checkbox"/> - Board of Adjustment * / ** | <input type="checkbox"/> - Planning and Zoning Commission * / ** |
| <input type="checkbox"/> - Golf Advisory Board | <input type="checkbox"/> - Recreation Commission |
| <input type="checkbox"/> - Municipal Arts Commission | <input type="checkbox"/> - Tree Commission |
| <input type="checkbox"/> - Municipal Code Enforcement Board * | <input type="checkbox"/> - Utility Advisory Board |
| <input type="checkbox"/> - Municipal Tennis Association Advisory Board | |

* Requires Financial Disclosure Form (if appointed to board/commission)
** Requires Property Description

Property Description: _____

Until such time as you are selected for the board/commission of your choice, can we submit your application when vacancies occur without contacting you each time? Yes No

Why do you think you are qualified to serve on this Board?

I have lived in the Ocala Historic District for over 30 years and HOA for 25 years as a board member. I'm a resident & love the district.

I HEREBY CONFIRM THAT I HAVE READ AND UNDERSTAND THIS APPLICATION, THAT ALL INFORMATION FURNISHED BY ME IS TRUE AND ACCURATE AND THAT, TO THE BEST OF MY KNOWLEDGE, I MEET THE CRITERIA FOR SERVING ON THE BOARD(S)/COMMISSION(S) FOR WHICH I AM APPLYING.

Signature: Barbara Corand Date: 1-5-23

Notes:

- (1) Application effective for ONE YEAR from date of completion
- (2) If you have any questions regarding this application, please call the Office of the City Clerk at (352) 629-8266

Return to:

City Clerk's Office
110 SE Watula Avenue
Ocala, FL 34471