

# CITY OF OCALA

## BOARD AND COMMISSION APPLICATION

Name: Anthony Ortiz Home Phone: [REDACTED]  
Home Address: [REDACTED]  
City, State, Zip Code: [REDACTED]  
Business: — Business Phone: —  
Business Address: —  
Occupation: Firefighter Email Address: aortiz@ocalafl.org  
Brief Resume of Education and Experience:

Are you a Resident of Marion County? Yes ☒ No ☐  
(If so, state length of time) Number of Years: —  
Do you own property within the City limits? Yes ☐ No ☒ ☒  
Please briefly describe: —  
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.*

*A Financial Disclosure Form will be required to be completed upon appointment to any pension board.*

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

- ☐ Rank — Firefighters' Pension Board  
☒ Rank — General Employee Pension Board of Trustees  
☐ Rank — Ocala Police Officers' Retirement System Board of Trustees

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 Currently Serve as a board member*

**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: \_\_\_\_\_



Date: \_\_\_\_\_

*12/10/21*

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

## CITY OF OCALA RETIREMENT BOARD ADDITIONAL INFORMATION REQUEST

### High School

Name and Location of School: Bellevue High School

Received: ☒ Diploma ☐ Other ☐ None

### College, University or Professional School

Name and location of School: Columbia Southern University

Date of Attendance (Month/Year): From: 2016 To: 2022 Credits Earned: QTR \_\_\_\_\_ SEM Senior

Major/Minor Course of Study: Fire Admin. Type of Degree Earned: BS

Name and location of School: \_\_\_\_\_

Date of Attendance (Month/Year): From: \_\_\_\_\_ To: \_\_\_\_\_ Credits Earned: QTR \_\_\_\_\_ SEM \_\_\_\_\_

Major/Minor Course of Study: \_\_\_\_\_ Type of Degree Earned: \_\_\_\_\_

### Job-Related Training or Course Work

Name and location of School: Florida State Fire College

Date of Attendance (Month/Year): From: \_\_\_\_\_ To: \_\_\_\_\_ Credits Earned: Class \_\_\_\_\_ Clock \_\_\_\_\_

Course of Study: Fire Standards Type of Degree Earned: Cert. program

Name and location of School: \_\_\_\_\_

Date of Attendance (Month/Year): From: \_\_\_\_\_ To: \_\_\_\_\_ Credits Earned: Class \_\_\_\_\_ Clock \_\_\_\_\_

Course of Study: \_\_\_\_\_ Type of Degree Earned: \_\_\_\_\_

### Periods of Employment

Name of Present Employer: City of Ocala

Duties & Responsibilities: Fire Marshal

Name of Previous Employer: Marion County, FL

Duties & Responsibilities:

Firefighter