



Application for City Council Appointments to Boards, Authorities, and Commissions

Office of the City Clerk, P.O. Box 12910, Pensacola, FL 32521, 850-435-1606

This application will be utilized in considering you for appointment by City Council to a board, authority or commission. Pursuant to Florida Statutes, Chapter 119, all information provided on or with this form becomes a public record and is subject to disclosure, unless otherwise exempted by law.

- Complete each blank on the application
- Completed applications will be kept on file for a period of one (1) year from the date received in the Office of the City Clerk
- **It is necessary to contact a member of Council to obtain a nomination in order to be placed on the ballot for consideration. Please go to www.cityofpensacola.com for Council Member contact information.** If you have any questions, contact the City Clerk's Office at the number listed above.
- Please type or print legibly.

Name: Georgia Blackman Email Address: _____

Home Address: 2017 N 7th Work Address: 424 1299

Preferred Contact Phone Number(s): _____

To which address do you prefer correspondence regarding this application be sent: ___ Residence ___ Business

Are you a resident of the City? Yes ___ No If yes, which district: 1 2 3 4 5 6 7 How long? 80 yrs
Circle one

Do you own property within the City limits? Are you a registered voter in the City of Pensacola? ___ Yes ___ No

Board (s) of interest: Eastside Redevelopment Board

Please list the reasons for your interest in this position (if necessary, continue on reverse side or on an attached sheet).

Life long resident. Retired Business owner. Community organizer

Are you currently on a City board, authority, or commission? ___ If yes, which board? _____

Do you now hold public office: ___ If so, what is the office? _____

The Florida Constitution, in section 5 (a) of Article II, prohibits simultaneous "dual office holding". If you were already serving on a board, authority, or commission for the City of Pensacola or for another governmental agency, would you be willing to resign in order to accept the appointment you now seek? ___ Yes ___ No

In order to encourage diversity in selections of members of government committees, the following information is required by Florida Statute 760.80 for some committees. Describe yourself within the categories below.

RACE:	GENDER:	PHYSICALLY DISABLED:
<input checked="" type="checkbox"/> African-American	<input type="checkbox"/> Male	<input type="checkbox"/> Yes
<input type="checkbox"/> Asian-American	<input type="checkbox"/> Female	<input checked="" type="checkbox"/> No
<input type="checkbox"/> Hispanic-American	<input type="checkbox"/> Other	

I hereby certify that the statements and answers provided are true and accurate. I understand that any false statements may be cause for removal from a board or committee if appointed.

Signature Georgia M. Blackman Date 4-6-22

THANK YOU FOR YOUR WILLINGNESS TO SERVE