SCANNED



APR 1 8 2016

CITY MANAGER'S OFFICE

BOARDS AND COMMISSIONS APPLICATION

NAME: Jenan	ex Brice WORK NUMBER: 972 2808306		
ADDRESS:	HOME NUMBER:		
E-mail Address			
Spouse's Name	e (optional):		
Resident of Far	rmers Branch years. Registered Voter? Yes #No		
If less than 2 ye	ears: prior addressLength		
Occupation: Emacro: al Real Estate			
Employer: Hult Lunsford Commercial Address (optional): 5055 (celler Spress Rd Suite 30. Addison Thosoph If any previous Board or Commission experience (in any City), state details: NTCAR - Board i- Dallas			
		List memberships of any Civic Organizations:	
		List any particular qualifications which you think might be beneficial in serving on a board	
CHECK WHICH	H BOARD(S) YOU WOULD LIKE TO SERVE ON:		
	ANIMAL SHELTER ADVISORY COMMITTEE (2 Year Term)		
	METROCREST HOSPITAL AUTHORITY (2 Year Term)		
	LIBRARY BOARD (2 Year Term)		
	PARKS AND RECREATION BOARD (2 Year Term)		
	PLANNING AND ZONING COMMISSION (3 Year Term)		
	SENIOR ADVISORY BOARD (MUST BE 50 YRS OF AGE OR OLDER) (2 Year Term)		
	ZONING BOARD OF ADJUSTMENT AND BUILDING CODE BOARD OF APPEALS (2 Year Term)		
	HISTORICAL PRESERVATION AND RESTORATION BOARD (2 Year Term)		
	NDUSTRIAL DEVELOPMENT CORPORATION (6 Year Term)		
	HOUSING FINANCE CORPORATION (6 Year Term)		
	VALWOOD IMPROVEMENT AUTHORITY (MUST BE LANDOWNER IN VALWOOD IMPROVEMENT DISTRICT) (2 Year Term)		
•			
	COMMUNITY WATCH COMMITTEE (2 Year Term)		
	FAMILY ADVISORY BOARD (3 Year Term)		
	OTHER		

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE RECEIVED AND REVIEWED THE CITY OF FARMERS BRANCH BOARD AND COMMISSION HANDBOOK. I ALSO UNDERSTAND AND ACKNOWLEDGE THAT FARMERS BRANCH CODE OF ORDINANCES §2-33 REQUIRES THAT I AGREE TO THE CITY PERFORMING A CRIMINAL HISTORY CHECK ON ME PRIOR TO MY APPOINTMENT TO A BOARD OR COMMISSION AND HEREBY GRANT MY CONSENT TO THE PERFORMANCE OF SAID CRIMINAL HISTORY CHECK.

I UNDERSTAND AND ACKNOWLEDGE THAT IF I AM APPOINTED TO A BOARD OR COMMISSION, THE TEXAS PUBLIC INFORMATION ACT (TEX.GOVT. CODE §§552.001, ET.SEQ.) MAY REQUIRE THE CITY OF FARMERS BRANCH TO DISCLOSE PERSONAL INFORMATION IN ITS POSSESSION TO MEMBERS OF THE PUBLIC WHO MAKE WRITTEN REQUESTS FOR SUCH INFORMATION UNLESS A PUBLIC ACCESS FORM IS ON FILE.

SIGNATURE

DATE

This application will be held on file for one year