

### CITY OF OAKLAND PARK APPLICATION FOR ADVISORY BOARD APPOINTMENTS



Your Service to our City is Earnestly Solicited

Service on a Board or Committee provides citizens with an opportunity to help shape policy and direction for the City of Oakland Park. Residents are cordially invited to apply for appointment by the City Commission to a City Board. Applications are valid for three (3) years. Please check Boards/Committees for which you wish to be considered:

| ✓       Art and Cultural Board         ✓       Beautification Advisory Board         ✓       Board of Adjustment*         ✓       Civil Service Board | Code Enforcement Board* Historic Preservation Board Planning and Zoning Board* Program for Public Information Board | ☐ School Advisory Board ☐ Unsafe Structures Board* ☐ Local Government Academy (Ten Week Course)                            |
|---|---|--|
| Application is for: ■ New Appointment □ Re-submissio * Per Section 112.317 Florida Statutes, Members of Some Bo                                       |   |  |
| Please type or print information. PERSONAL:   |   | •  |
| Name: Ivan Castro   | E-Mail Address: ivanrca   | stroo@gmail.com  |
| Residential Address: 481 NW 36th St   |   |  |
| Business Number:()  |   |  |
| (You must use your <u>Oakland Park</u> home address on this   |   |  |
| EDUCATION:  |   |  |
| Name of High School: Cypress Bay High School  | Location: Weston, FL  |  |
| College (if applicable): Broward College  | Location: Davi  | e, FL  |
| Years Completed: 4  | nessField of Study: Com   | munications  |
| Other professional or technical training (Name of school, cou EMPLOYMENT:   |   |  |
| Current or last employer: Broward County Sup  | of Elections Address: 115 S A   | andrews Ave  |
| Position: Voter Engagement & Communications coording  | nator Years of Service: 5   |  |
| Duties: Communications, Social Media, Voter   | Engagement, Petitions, Election   | Security   |
| OTHER QUALIFICATIONS: Briefly describe any specific   | ic expertise and/or abilities that would pertain  | to your service on a City Board:   |
| Fluent in English, Spanish & Portuguese   | F   |  |
| MEMBERSHIPS: Oakland Park Organization(s) Yes   | ars in Membership Office Held (if any)  |  |
| Outside City  |   |  |
| ACKNOWLEDGMENT (Check Below:)   |   | <del>_</del>   |
| ■ I understand that in accordance with the Florida Sunsl  | nine Law, this information will be available f  | or public review and I waive any objections to such publication.   |
| ■ I understand that appointment to any of the positions   | indicated above is a voluntary service.   |  |
| ordinances of the City, County, and State of Florida, par   |   | vor to serve my full term, and will comply with all laws or<br>public office and the financial disclosure requirements, if |
| applicable, to my position.  I understand, if appointed, an updated application my  | ist he submitted to seek annointment to ano   | ther advisory hoard RECEIVED   |
| ■ I understand that if appointed, I must take the oath of   |   |  |
| ■ I understand that I may sit on only one Commission a  | -   | DEC 1 5 2021   |
| Since the same same same same same same same sam  |   | 22/2021 CITY CLERK   |
| Signature of Applicant  | 11.<br>Dat  |  |



## Advisory Board/Committee Member Confirmation of Request for Appointment

| Name:/van Castro  |
|---|
| Address: 481 NW 36th St   |
| Email: ivancastroa@gmail, com   |
| Phone: 786-800-0486   |
| Current Resident of Oakland Park: Yes No  |
| Advisory Board/Committee: Art & Culture Board   |
| ✓ Original Appointment Do Not Wish to Be Reappointed  |
| Request Re-Appointment  |
| By completing this form, I certify the following information:   |
| ✓ I want to serve/continue to serve.  |
| I meet all legal requirements to serve (residency, etc.)  |
| I am aware of my duties and legal and other obligations as a board member.  |
| I understand that should I fail to abide by the rules and obligations of this position or fail to continue to meet the conditions of membership (move out of city), I must disclose to the City Clerk prior to being considered for appointment or reappointment. |
| $\sqrt{}$ I confirm the board member application attached is current, including contact information.  |
| I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.  |
| $\frac{\sqrt{31/2022}}{\text{Date}}$  |
| To be completed by staff for re-appointment Appointed by: Board Expiration Date:  Date Appointed:  Date Appointed:  |
| All information has been reviewed and confirmed  Date: 2/100  |
| Reviewed by: 12 Coldinary   |



#### Click to Email



### CITY OF OAKLAND PARK APPLICATION FOR ADVISORY BOARD APPOINTMENT

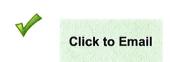
|   | ity is Earnestly Solicited policy and direction for the City of Oakland Park. Residents are cordially invited to apply or three (3) years.                          |
|---|---|
| ✓ Art and Cultural Board       □ Code Enforcement Board*         □ Beautification Advisory Board       □ Historic Preservation Board         □ Board of Adjustment*       □ Planning and Zoning Board*         □ Civil Service Board       □ Police/Fire Pension Board* | School Advisory Board Unsafe Structures Board   |
| <b>Application is for:</b> ■ New Appointment □ Re-submission □ If you currently ser * Per Section 112.317 Florida Statutes, Members of Some Boards are required to file   | eve on a Board, please state which Board  |
| Please type or print information.  PERSONAL:  |   |
| Name: Carlos Ferrer E-M   | ail Address: clos5434@gmail.com   |
| Residential Address: 4371 NE 13 Avenue Oakland Park. 2  | Zip: 33334 Telephone Number: 954) 205-2610  |
| Business Number: Cell Number:   | 954 <sub>)</sub> 205-2610   |
| (You must use your <u>Oakland Park</u> home address on this application.) Voting P  | recinct Number: D001  |
| EDUCATION:  |   |
|   | ation: Fort Lauderdale, FL  |
| College (if applicable): Florida Atlantic University  | Location: Boca Raton, FL  |
| Years Completed: 4Degree: BA  | Field of Study: Marketing / Animation   |
| Other professional or technical training (Name of school, course name, etc.):  EMPLOYMENT:  |   |
| Current or last employer: Bruce D. Green P.A.   | Address: 1313 South Andrews Avenue  |
| Position: Administrative Assistant Yea  | rs of Service: 25   |
| Duties: Client Relations, Case File Management, Scheen  | duling Coordinator, IT  |
| OTHER QUALIFICATIONS: Briefly describe any specific expertise and/or ability  | ties that would pertain to your service on a City Board:  |
|   | inment Podcast, live events and Q&A's for Entertainment   |
| Events and Conventions.   | * TILL 48   |
| MEMBERSHIPS: Oakland Park Organization(s) Years in Membership Of  | fice Held (if any)  |
| Outside City  |   |
| ACKNOWLEDGMENT (Check Below:)   |   |
| ■ I understand that in accordance with the Florida Sunshine Law, this informa   | tion will be available for public review and I waive any objections to such publication.  |
| ■ I understand that appointment to any of the positions indicated above is a v  | oluntary service.   |
|   | will make every endeavor to serve my full term, and will comply with all laws or ning to the conduct of public office and the financial disclosure requirements, if |
| ■ I understand, if appointed, an updated application must be submitted to see   | k appointment to another advisory board.  |
| $\blacksquare$ I understand that if appointed, I must take the oath of office prescribed in t   | he Florida Statutes. JUN 1 4 2021   |
| ■ I understand that I may sit on only one Commission appointed board.   |   |
|   | 6-14-21 CITY CLERK  |
| Signature of Applicant  | 6-14-21<br>Date   |



# Advisory Board/Committee Member Confirmation of Request for Appointment

| Name: Carlos A Ferrer   |  |  |
|---|--|--|
| Address: 4371 NE 13 Avenue, Oakland Park FL 33334   |  |  |
| Email: clos5434@gmail.com   |  |  |
| Phone: 954-205-2610   |  |  |
| Current Resident of Oakland Park: Yes No  |  |  |
| Advisory Board/Committee: Art and Culture   |  |  |
| X Original Appointment Do Not Wish to Be Reappointed  |  |  |
| Request Re-Appointment  |  |  |
| By completing this form, I certify the following information:   |  |  |
| X I want to serve/continue to serve.  |  |  |
| X I meet all legal requirements to serve (residency, etc.)  |  |  |
| X I am aware of my duties and legal and other obligations as a board member.  |  |  |
| I understand that should I fail to abide by the rules and obligations of this position or fail to continue to meet the conditions of membership (move out of city), I must disclose to the City Clerk prior to being considered for appointment or reappointment. |  |  |
| X I confirm the board member application attached is current, including contact information.  |  |  |
| I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.  |  |  |
| Signature 1-31-22 Date  |  |  |
| To be completed by staff for re-appointment Appointed by: Board Expiration Date:  Date Appointed:   |  |  |
| All information has been reviewed and confirmed  Date: 2/1/22   |  |  |





#### CITY OF OAKLAND PARK APPLICATION FOR ADVISORY BOARD APPOINTMENT

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|--|--|
| for appointment by the City Commission to a City Board. Applications are valid for three (3) years.                                    |  |
| Please check Boards/Committees for which you wish to be considered:  |  |

| ✓ Art and Cultural Board       ☐ Code Enforcement Board*         ✓ Beautification Advisory Board       ☐ Historic Preservation Board         ☐ Board of Adjustment*       ☐ Planning and Zoning Board*         ✓ Civil Service Board       ☐ Police/Fire Pension Board* | <ul><li>□ School Advisory Board</li><li>□ Unsafe Structures Board</li></ul> |  |  |  |  |
|---|---|--|--|--|--|
| <b>Application is for:</b> ■ New Appointment □ Re-submission □ If you currently serve on a Board, please state which Board ** Per Section 112.317 Florida Statutes, Members of Some Boards are required to file a Financial Disclosure Report.                          |   |  |  |  |  |
| Please type or print information.  PERSONAL:  |   |  |  |  |  |
| Name: Michael S. Nicotera E-Mail Address: m   | nsnicotera@icloud.com   |  |  |  |  |
| Residential Address: 112 Royal Park DR, #3C Oakland Park, Zip: 33309  |   |  |  |  |  |
| Business Number: (954) 306-8999 Cell Number: (714) 814-   |   |  |  |  |  |
| (You must use your Oakland Park home address on this application.) Voting Precinct Number   |   |  |  |  |  |
| EDUCATION:  |   |  |  |  |  |
| Name of High School: William Horlick High School Location: Racine   | e, Wisconsin  |  |  |  |  |
| College (if applicable): Marquette University  Location Milwaukee, Wisconsin  |   |  |  |  |  |
| Years Completed: 4 Degree: B.A. with Honors Field of Study  | Major: English Lit. /Minor: Chemistry                                       |  |  |  |  |
| Other professional or technical training (Name of school, course name, etc.):  Senior managements.  | gement training, and many seminars.   |  |  |  |  |
| Current or last employer: Self employedAddress:_ 11   | 2 Royal Park Dr., #3C   |  |  |  |  |
| Position: Licensed Realtor(r)  Years of Service: 3  |   |  |  |  |  |
| Duties: Assisting clients in the sale, purchase or rental of residential projections.   |   |  |  |  |  |
| OTHER QUALIFICATIONS: Briefly describe any specific expertise and/or abilities that would   |   |  |  |  |  |
| Previous Senior Executive Positions with several major na   |   |  |  |  |  |
|   |   |  |  |  |  |
| MEMBERSHIPS: Oakland Park Organization(s)  Years in Membership Office Held (if an   | <u>v)</u>   |  |  |  |  |
| Pride Jazz Ensemble-Pianist. 4 years.   |   |  |  |  |  |
| Outside City  |   |  |  |  |  |
| ACKNOWLEDGMENT (Check Below:)   |   |  |  |  |  |
| ■ I understand that in accordance with the Florida Sunshine Law, this information will be ava   | ailable for public review and I waive any objections to such publication.   |  |  |  |  |
| ■ I understand that appointment to any of the positions indicated above is a voluntary servi  | ce.   |  |  |  |  |
| ■ If appointed, I agree to faithfully and fully perform the duties of my office, will make ever ordinances of the City, County, and State of Florida, particularly those pertaining to the con applicable, to my position.  |   |  |  |  |  |
| ■ I understand, if appointed, an updated application must be submitted to seek appointmen   | •   |  |  |  |  |
| ■ I understand that if appointed, I must take the oath of office prescribed in the Florida Sta  | tutes. AUG 1 1 2021   |  |  |  |  |
| ■ I understand that I may sit on only one Commission appointed board.   |   |  |  |  |  |
| Digitally signed by Michael S. Nicotera Date: 2021.08.11 15:23:51-04'00'  | August 11, 2021. CITY CLERK   |  |  |  |  |
| Signature of Applicant  | Date  |  |  |  |  |



## Advisory Board/Committee Member Confirmation of Request for Appointment

| LORIDA  |
|---|
| Name: Michael S. Nicotera   |
| Address:    Depart D. 430   FEB 0 7 2022   Email: Manicotera a ichoud. com   CITY CLERK   |
| Email: Manicotera a ichoud, com CITY CITY   |
| Phone: 714-814-3436   |
| Current Resident of Oakland Park: Yes No  |
| Advisory Board/Committee: ART & Cutture Board   |
| Original Appointment Do Not Wish to Be Reappointed  |
| Request Re-Appointment  |
| By completing this form, I certify the following information:   |
| I want to serve/continue to serve.  |
| I meet all legal requirements to serve (residency, etc.)  |
| I am aware of my duties and legal and other obligations as a board member.  |
| I understand that should I fail to abide by the rules and obligations of this position or fail to continue to meet the conditions of membership (move out of city), I must disclose to the City Clerk prior to being considered for appointment or reappointment. |
| I confirm the board member application attached is current, including contact information.  |
| I have no intention at this time to relocate outside of the City limits and understand that should this change, I will immediately provide notice to the City Clerk.  |
| Signature 2/2/2021  |
| To be completed by staff for re-appointment  Appointed by: Date Appointed:  |
| Board Expiration Date:  |
| All information has been reviewed and confirmed  Date: 2/8/50   |
| Reviewed by:  |