

VOLUNTEER BOARD AND COMMITTEE APPLICATION

Thank you for your interest in serving the City of Palm Coast.

Your completion of this application is necessary so that the members of the City Council can thoroughly review each application as part of their consideration of your appointment.

Please be advised that background screening of all applicants is required.

Résumés may be attached.

Please check the Board/Committee/Council for which you are applying:

| | | Beautification & Environmental Advisory Committee | | Planning & Land Development Regulation Board ** | | |
|--|---|--|-------------|---|--|--|
| | | Code Enforcement Board* | | Volunteer Firefighters' Pension Fund Board* | | |
| | | Citizen's Advisory Committee | | Bicycle and Pedestrian Advisory Committee | | |
| | | Residential Drainage Citizen Advisory Committee* | \boxtimes | Charter Review Committee | | |
| | | Flagler County Housing Task Force/Affordable Housing Citizen from the City of Palm Coast representing Representative of residential home building indu | esser | | | |
| * | Appointees must file a Financial Disclosure Form 1 at time of appointment and ANNUALLY thereafter with the Florida State Commission on Ethics. | | | | | |
| *: | *App | pointees will also serve on the Citizens' Advisory Task F | orce | : | | |
| | Requires at least one board member to be appointed from EACH City Council District, when possible. | | | | | |
| | ALL CITY BOARDS AND COMMITTEES ARE SUBJECT TO THE SUNSHINE LAW AND PUBLIC RECORDS LAW. | | | | | |
| R | RE-APPOINTMENT | | | | | |
| | 1. PERSONAL | | | | | |
| | | Name: Georgianne Miller | E-m | nail address Georgianne.GM@gmail.com | | |
| | | Residence Address: 1 Reine Pl | | District 4 | | |
| | | City: Palm Coast State: | FL | Zip: 32164 | | |
| Mailing Address (If Different from Residence): | | | | | | |
| | | Home Phone 301 502-6512 B | Busine | ess Phone: | | |
| | | Date of Birth: March 22, 1961 | Pla | ace of Birth: Youngstown Ohio | | |

| How long have you been a perman | ent resident of Paim Coas | t: Since S | eptember 2024/10 mo | onuis | |
|--|--|--|--|---|--|
| What year did you become a contir | nuous resident of the City of | of Palm Coast | September 2024 | otember 2024 | |
| st all places of residence for the la | st five years | | | | |
| Address | - | ata | From | То | |
| #1 Reine Pl | City & St Palm Coast, FL | ate | | 2024-Present | |
| 1700 SW 78th Ave | Plantation, FL | ************************************** | | 019-September 2024 | |
| 5802 Blue Ridge Road | Mineral, VA | | | ecember 2019 | |
| 8604 Goshen View Drive | Laytonsville MD | | | 91-May 2017 | |
| 8004 GOSHEII VIEW DIIVE | Laytonsvine MD | | August 199 | 71-Way 2017 | |
| Are you a registered voter in Flagle | er County? 🛚 🖂 Yes | ☐ No | | | |
| Have you ever used or been knowr | n by any other legal name? |) | | ☐ No | |
| If yes, explain: <u>Married from S</u> | eptember 1986-July 2017 | Georgianne M | lacatee Mitchell | | |
| Are you a citizen of the United Stat | es? 🛚 🖂 Yes | □No | | | |
| If you are a naturalized citizen of th MPLOYMENT HISTORY (A résu | | | icant) (If retired, please s | till list your previous oc | |
| If you are a naturalized citizen of the MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation | umé may be attached at the o | | icant) (If retired, please s | till list your previous oc | |
| MPLOYMENT HISTORY (A résund employment history.) | umé may be attached at the o | ption of the appl | icant) (If retired, please s Florida Department | | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Continuity of Oper | umé may be attached at the o | ption of the appl | | | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Continuity of Oper | umé may be attached at the o on before retirement: <u>F</u> ations Planner Curre | etired 2025 nt Employer: | | | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Occupation: Continuity of Oper Current Business Address: 34 | umé may be attached at the o on before retirement:F rations Planner Curre 00 Commercial Blvd | etired 2025 nt Employer: | | | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation: Continuity of Oper Current Business Address: 34 Fort Lauderdale | on before retirement:F ations Planner Curre 00 Commercial Blvd FL 333 State Zip during the last five years. | etion of the appletering 2025 nt Employer: 09 Include emplo | Florida Department Phone # | of Transportation | |
| MPLOYMENT HISTORY (A résulted employment history.) If retired, please list your occupation Occupation: Continuity of Oper Current Business Address: 34 Fort Lauderdale City List all of your employment history | on before retirement:F ations Planner Curre 00 Commercial Blvd FL 333 State Zip during the last five years. | etion of the appletering 2025 nt Employer: 09 Include emplo | Florida Department Phone # oyers' name, business | of Transportation | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Occupation: Continuity of Oper Current Business Address: 34 Fort Lauderdale City List all of your employment history business, occupation, or job title a Employer & Address Florida Department of Transporta 2019-May 2024 | on before retirement: | nt Employer: O Include employer. Occupational T | Phone # oyers' name, business itle Period o | of Transportation address, type of f Employment rgency Mgr/ Dec | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Occupation: Continuity of Oper Current Business Address: 34 Fort Lauderdale City List all of your employment history business, occupation, or job title a Employer & Address Florida Department of Transporta | on before retirement: | nt Employer: O Include employer. Occupational T | Phone # oyers' name, business itle Period o | of Transportation address, type of f Employment rgency Mgr/ Dec | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Continuity of Oper Current Business Address: 34 Fort Lauderdale City List all of your employment history business, occupation, or job title a Employer & Address Florida Department of Transporta 2019-May 2024 National Cancer Institute, 9606 M | on before retirement: | nt Employer: O9 Include employer. Occupational T vd Fort Laude le, MD 20850 | Phone # Oyers' name, business itle Period or ordale, FL 33309/ Eme Continuity of Operati | address, type of f Employment rgency Mgr/ Dec ons Planner, | |
| MPLOYMENT HISTORY (A résund employment history.) If retired, please list your occupation Continuity of Oper Current Business Address: 34 Fort Lauderdale City List all of your employment history business, occupation, or job title a Employer & Address Florida Department of Transporta 2019-May 2024 National Cancer Institute, 9606 M June 2014 -Sept 2019 Have you ever been employed by | on before retirement:F rations Planner | nt Employer: O9 Include employer. Occupational T vd Fort Laude le, MD 20850 | Phone # Oyers' name, business itle Period or ordale, FL 33309/ Eme Continuity of Operati | address, type of f Employment regency Mgr/ Dec ons Planner, Yes | |

2.

| 3. EDUCATION | | | |
|--|---|-----------------------------|---|
| High School: Ch | ear Graduated: 1979 | | |
| List postsecondary | Name & Location educational institutions or pr | ograms attended: | |
| Name & Lo | | <u>Dates Attended</u> | Certificate/Degrees Received |
| Mary Baldwin Col | | 1979-1983 | Bus Management/ Sociology |
| University of Phoe | enix | 2008-2010 | Masters Health Administration Emergency Management |
| CERTIFICATIONS 8 | & LICENSURES | | |
| Certified Emerg | gency Manager (CEM) | | |
| Certified Continue | nuity of Excellence Professio | nal I and Master II | |
| Master Exercise | e Practitioner (MEP) | | |
| Homeland Secu | ırity Exercise and Evaluation | Program (HSEEP) | |
| FEMA Professi | ional Development and Adva | nced Series Achievement | |
| Community En | nergency Response (CERT) I | nstructor, Trainer, Program | n Manager |
| Certified Public | Manager Level 4 (Superviso | or) | |
| | d Contract Manager (FCCM) | | |
| | | | |
| Are you or have you | ou ever been a member of the | | Yes ⊠ No |
| Branch or Componen | t: | | |
| Date and Type of D | Discharge: | | |
| . INTEREST/ACTIVIT | TIES/COMMUNITY AND/C | R CIVIC INVOLVEMEN | IT? |
| Are you currently or | have you ever served on any | / City Volunteer Board or C | Committee? ☐ Yes ☒ No |
| If yes, which Board or Committee? | | | Planning Council (LEPC) and in nating (BCECC) Council with FDOT |
| | er during the past five (5) year | | ns or community groups of which you |
| IAEM -Internationa | al Association of Emergency | | |
| Transportation Cau | cus / FFPA - Florida Emer | | iation |
| | eus / i El X- i lorida Emerg | gency Preparedness Associ | |

| LEPC – Montgomery County MD, | , Louisa County VA, Broward County FL, St Johns County FL |
|---|--|
| , | |
| QUALIFICATIONS FOR APPOIN | TMENT |
| State your experiences and interes | sts or elements of your personal history that qualify you for this appointment. |
| | nanagement, however the positions I have held and the volunteer work I have r, thus making me qualified for this volunteer position. |
| and leadership. I have written by-leadership. Committees (LEPC), Community | the Palm Coast Charter Committee based on my previous committee positions aws for many organizations and have been part of Local Emergency Planning Emergency Response Teams/Training (CERT), and with the Broward County, FL (BCECC) for the past 15 years. I also have been an emergency planner for the |
| medical offices, and departments, planning career with the Maryland with the National Cancer Institute, CERT and LEPC organizations, so | ergency Planning Committees (LEPC), biorepositories, animal laboratories, as well as most recently with the Department of Transportation. I started my I State Defense Force, so I have state planning experience. I continued my career, so I have federal experience, I have volunteered for Montgomery County for the D I have County experience, I was a voting member of the Broward County (BCECC) and I volunteered for the City of Plantation CERT, so I have city |
| Management, I have planning know | ning experience and since I started with the Maryland Defense Force Emergency wledge working with military plans for disaster response. Working with the me qualified to assist the City of Palm Coast with updating their charter for the |
| implement policy into action, inco shelf. This charter is a policy that s | nted person where I link ideas to action. I am very organized leading me to rporate groups to be part of the culture, and develop plans that do not sit on a should direct the policies and procedures in Palm Coast. I have a unique ability to to into operational policies, processes and procedures to quick actions to improve esidents. |
| Have you received any degree(s), appointment? If yes, list below: | professional certification(s), or designation(s) related to the subject matter of this Yes No |
| Do you currently hold any office or | position (appointive, civil service, or other) with any government entity? If yes, list |
| below: | ☐ Yes |
| Have you ever been elected or app | pointed to any public office? If yes, list below: Yes No |
| Office Title | Date of Election or Appointment Term of Office Level of Government |

6.

| Have you or a business of dealings during the last fou appointed or are seeking a | r (4) years with City governmer | r, officer, or employent, including the offic | e, held any contractual or other direct e or agency to which you have been If yes, explain below: |
|--|---|---|--|
| Name of Business | Relationship to the Busines | <u>s</u> | Business Relationship to Agency |
| | | | |
| If yes, provide the information | d any occupational or profession on below. If any disciplinary actions on the issuing authority, s | on (fine, probation, s | suspension, revocation, disbarment, |
| License/certificate Title & No. | Original Date of Issuance | Issuing Authority | Disciplinary Action/Date |
| | | | |
| | | | |
| | | | |
| How do you believe that you Committee and are you will | ur education, experience, talenting to act as a decision maker a | ts and skills will ben and not as an advoca | nefit the work of the Board or ate, if required by law? |
| International Association of skills helped me with the fir the bylaws in Rockville Mar County Local Emergency Pl County I worked with 17 otl scratch and having the documents of the county I worked with 17 otl scratch and having the documents. | Emergency Managers and org e department, assisting with cryland. I was instrumental in thanning Committee (LEPC) as her organizations in the creation ment accepted and within the y | anizations I have he eating the Montgom the development of the well. As a voting month of this document. The ear of developing as | ncy Manager (CEM) through the lped with writing by-laws. These ery County CERT team and creating the by-laws for the Montgomery ember of the LEPC in Montgomery We created the document from and receiving the proper the laccepted by the City of Rockville |
| working knowledge volunte | ering for Plantation CERT for g, knowledgeable CERT Tean | five years helped wi | oped the by-laws and plans. My ith this endeavor and the City of that may hit Plantation as well as |
| I also assisted the Broward (last year which were adopte | | ng Council (BCECC | () in updating their by-laws/charter |
| | | | |

| W | hat is your understanding of the relationship of this Board or Committee to the City Council? |
|----------|---|
| pr Re | nis committee will conduct a review of the City Charter with the objective of recommendations for revisions to be esented to the City Council and Palm Coast residents eventually since changes require a city vote. The Charter eview Committee (CRC) will review and analyze the Charter and advise the Council on areas where amendments e deemed relevant and necessary for today and the next decade |
| | |
| | |
| - | |
| REF | FERENCES – Please list three references (business and/or personal) |
| Ra | aymond Boccelli 2307 Foxley Rd, Timonium, MD 21093 (410) 652-6740 me, Address & Telephone Number |
| Di | anna Heard 1238 NW 114th Ave, Coral Springs, FL 33071 (954) 663-4357 |
| Nar | me, Address & Telephone Number |
| | nel Gordon, 453 Lightning Hill Road, North, SC 29112 (954) 412 8323 me, Address & Telephone Number |
| | |

8. ACKNOWLEDGMENT

| If required by | law, will you file a financial disclosure statem | ent? | Yes | ☐ No | | |
|--|---|------------------------------|------------------------------|------|--|--|
| subject to financial | esponsibilities associated with being a memb disclosure laws and ex parte communicatio I Employees and City rules of conduct. | | | | | |
| | I certify that I have adequate time to serve if appointed and that I will serve in accordance with the requirements of the Board or Committee to which I am appointed. | | | | | |
| Further, by execu which shall include applying. | Further, by executing this application below, I am authorizing City staff to perform a personal background screening, which shall include a general criminal records check and other checks relative to the board or committee for which I am applying. | | | | | |
| Jeogram Signature | ne Miller | | (-12-25) e | 5 | | |
| NOTE: If you have questions concerning the duties and responsibilities of any of the above Boards or Committees please contact Virginia Smith. | | | | | | |
| RETURN TO: | Virginia Smith City of Palm Coast 160 Lake Ave. Palm Coast, Florida 32164 | PHONE: EMAIL: WEBSITE: | 386-986-2570 vsmith@palmcoas | | | |

ALL CITY BOARDS AND COMMITTEES ARE SUBJECT TO THE SUNSHINE LAW AND PUBLIC RECORDS LAW.

SUNSHINE LAW:

The primary purpose of Government in the Sunshine Law is to assure public access to the decision-making processes of public boards and commissions. The Sunshine Law extends to discussions and deliberations as well as to formal actions taken by boards and commissions.

Should you not be selected at this time, your application will be kept on file for consideration for six (6) months.

Should you wish to be considered for another board, committee, or task force during that time,
you must contact Virginia Smith and request reconsideration.