|  |  |
| --- | --- |
| T:\G.R\Patterson\ADMINISTRATIVE-OPGA\SEALS\buffalo_gray.jpg | COMMISSIONER’S COASTAL RESILIENCY ADVISORY GROUP APPLICATION |

1. **Personal Information 2. Photograph**

|  |  |
| --- | --- |
| Full Legal Name  |  |
| Preferred Name       |
| Spouse’s Name       |
| Physical Home Address        |
| City, State Zip      ,             |
| Mailing Address        |
| City, State Zip      ,             |
| County      | Work Telephone   -   -      | Home Telephone   -   -      |
| Cellular   -   -      | Preferred E-mail Address      | State Senator      |
| Secondary E-Mail Address (if applicable)      | State Representative      |

**2. Seat of Interest to You:**

|  |
| --- |
| [ ]  1.) Elected Official |
| [ ]  2.) Private Coastal Conservation or Regional Planning Organization |
| [ ]  **3.) Regional Port or Coastal Business Community** |

**3. Employment Information**

|  |  |  |
| --- | --- | --- |
| Employer      | Employer’s Address                | Present Job Title      |
| Profession      |
| Present Job Description      |

|  |
| --- |
| **Name** |

**4. Education/Training**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of School** | Name and Location of School | **Year Graduated** | **Degree and****Field of Study** |
| High School |       |       |       |
| Undergraduate |       |       |       |
| Graduate |       |       |       |
| Other |       |       |       |

**5. Employment History**

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | **Position** | **Dates** | **Location** |
|       |       |       |       |
|        |       |       |       |
|       |       |       |       |
|       |       |       |       |

**6. References**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | **Employer** | **City** | **Telephone** | **Relationship** |
|       |       |       |    -   -      |       |
|       |       |       |    -   -      |       |
|       |       |       |    -   -      |       |

**7. Professional Memberships** (including any state bar memberships)

|  |  |  |
| --- | --- | --- |
| **Organization** | **Title/Position** | **Current/Former** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |

**8. Volunteer Participation**

|  |  |  |
| --- | --- | --- |
| **Organization** | **Title/Position** | **Current/Former** |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |

|  |
| --- |
| **Name** |

**9. Miscellaneous Information**

|  |  |
| --- | --- |
| Do you currently serve, or have you ever served, on any local, state or federal government board, commission or committee or in any elected or appointed office? | [ ]  Yes [ ]  No |
| **Entity** | **Position** | **Dates** | **Compensated** **(Y/N)** | **Reimbursed****(Y/N)** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

|  |  |
| --- | --- |
| To the best of your knowledge, has any federal, state or local law enforcement or regulatory agency (on behalf of itself or any other person or entity) filed or investigated any grievance or complaint against you, your spouse, or an entity in which you have a material interest? If yes, give details and disposition (investigated, dismissed, reprimanded) | [ ]  Yes [ ]  No |
| **Agency** | **Date** | **Details and Disposition** |
|       |       |       |
|       |       |       |

|  |  |
| --- | --- |
| Have you ever been convicted in a criminal proceeding (excluding traffic violations), placed on probation, required to perform community service, or had a criminal proceeding disposed of by pre-trial diversion, deferred prosecution, deferred adjudication, or some similar proceeding? If yes, list the charge, the date of the offense, the city and/or county and state in which it allegedly occurred, and the disposition thereof. | [ ]  Yes [ ]  No |
|       |

|  |
| --- |
| **Name** |

**10. Personal Qualifications and Interest in the Position**

|  |
| --- |
|       |

**14. Certification**

|  |
| --- |
| **Full Legal Name** |
| **Date of Birth**    **/**    **/**      | **Texas Driver License or DPS ID#**       |
| **Are you a U.S. Citizen? [ ]  Yes [ ]  No** | **Place of Birth**       |
| **Date of naturalization (if not a citizen upon birth)**    **/**    **/**      |
| **Ethnicity: (optional; check all that apply)** **[ ]  White** **[ ]  African American** **[ ]  Hispanic** **[ ]  Asian American** **[ ]  Native American** **[ ]  Other** |

**CERTIFICATION OF APPLICANT**

**I hereby certify that the foregoing and any attached statements are true, accurate and complete. I agree that any misstatement, misrepresentation, or omission of a fact may result in my disqualification for appointment. I assign and hereby give the General Land Office full authority to conduct background investigations pertinent to this application. I specifically authorize the Texas Department of Public Safety to conduct a background investigation and to disclose the results of that investigation to the Commissioner or his authorized representatives.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Applicant’s Signature**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submit to: Date**

|  |  |  |
| --- | --- | --- |
| **Region 15****South East Texas Regional Planning Commission**Shaun Davis, sdavis@setrpc.org 2210 Eastex Freeway Beaumont, TX 77703 | **Region 16****Houston-Galveston Area Council**Chuck Wemple, cwemple@h-gac.com P.O. Box 22777Houston, TX 77227-2777(713) 993-4514 | **Region 17****Golden Crescent Regional Planning Commission**Joe Brannan, jbrannan@gcrpc.org 1908 N. Laurent St., 6th FloorVictoria, TX 77901(361) 578-1587 x 208 |
| **Region 20****Coastal Bend Council of Governments**John P. Buckner, John@cbcog98.orgP.O. Box 9909Corpus Christi, TX 78469(361) 883-5743 |  | **Region 21****Lower Rio Grande Valley Development Council**Ron Garza, rongarza@lrgvdc.org 301 W. Railroad St.Weslaco, TX 78596(956) 682-3281 |