



MARION COUNTY BOARD OF COUNTY COMMISSIONERS

APPLICATION FOR APPOINTMENT TO ADVISORY BOARD

(Please print or type)

NAME OF BOARD: Board of Adjustment		DATE: April 6, 2022
APPLICANT NAME: David Rubin		
EMAIL: ocaladave@gmail.com		
STREET ADDRESS: 54 Juniper Trail		HOME PHONE: (954) 614-6250
CITY: Ocala	ZIP CODE: 34480	WORK PHONE: N/A
BUSINESS NAME: N/A		ADDRESS:
OCCUPATION: Retired		PREVIOUS OCCUPATION: USPS Letter Carrier
REGISTERED VOTER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
REFERENCES: NAME	ADDRESS	PHONE
1. Father Jonathan French	510 SE Broadway St., Ocala 34471	(352) 622-7881
2. Father Frans van Santen	510 SE Broadway St., Ocala 34471	(352) 622-7881
3. Martha Slemmer	1236 NE 21 St, Ocala 34470	(352) 875-9754

(PLEASE DO NOT USE COMMISSIONERS AS REFERENCES)

PRESENT/PREVIOUS EMPLOYMENT RELATING TO THIS ADVISORY BOARD: None

PRESENT/PREVIOUS VOLUNTEER EXPERIENCE: 12 years volunteering in various capacities at Grace Episcopal Church in Ocala, over 5 years serving on this Board of Advisory.

SPECIAL QUALIFICATIONS: Strong sense of fairness, coupled with strong desire to see regulations adhered to.

HOW MUCH TIME DO YOU HAVE MONTHLY TO PREPARE FOR AND ATTEND BOARD MEETINGS? Retired - as much as necessary.

LIST ALL COUNTY AND CITY BOARDS (MARION COUNTY OR ELSEWHERE) ON WHICH YOU HAVE PREVIOUSLY SERVED (INCLUDE DATES OF SERVICE): At least 6 years on this Board of Adjustment, previously Vice-Chairman and currently Chairman.

RETURN FORM TO: MARION COUNTY BOARD OF COUNTY COMMISSIONERS
601 SE 25TH AVE., OCALA, FL 34471 or advisoryboards@marionfl.org

PLEASE CALL THE COMMISSION OFFICE AT (352) 438-2323 IF YOU HAVE ANY QUESTIONS REGARDING YOUR APPLICATION.

I authorize Marion County to contact my references and I understand that all statements made on this application may be verified by Marion County, including background checks. In addition, I understand that any misstatements or material omissions on my application may result in my removal from my appointed position.

By signing this application, the applicant agrees to attend at least one (1) advisory board seminar within six (6) months from the date of his or her appointment.

MARION COUNTY BCC

SIGN: David Rubin RECEIVED BY BCC: APR 6 2022

PRINT: David Rubin

* This application will be kept on file for a period of one year from date receipt by the Board of County Commissioners. Should a vacancy occur on the board to which you have applied, you will be notified.